

EXHIBIT A



2018 BULLETIN of INFORMATION

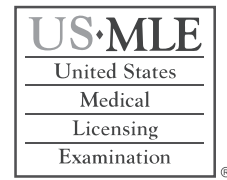


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IMPORTANT

You must become familiar with the information referenced in this *Bulletin* if you are an applicant with an eligibility period in 2018. If your eligibility period extends into 2019 and you test in 2019, you must become familiar with and will be subject to the policies and procedures detailed in the 2019 *Bulletin of Information* (BOI). If changes in the USMLE program occur after the release of this BOI, they will be effective when posted on the [USMLE website](#). You are responsible for checking the [USMLE website](#) for updates and changes to the USMLE policies and procedures.

IMPORTANT

If you are a student or graduate of a medical school outside the US or Canada with an eligibility period in 2018, in addition to becoming familiar with this BOI, you must also be familiar with the contents of the 2018 *Information Booklet* published by the ECFMG. If your eligibility period extends into 2019 and you test in 2019, you must become familiar with and will be subject to the policies and procedures detailed in the ECFMG 2019 *Information Booklet*. The ECFMG *Information Booklet* is available on the [ECFMG website](#). Students and graduates of medical schools outside the US and Canada are responsible for monitoring the [ECFMG website](#) to ensure they understand current ECFMG policies and procedures, including any changes.

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The United States Medical Licensing Examination® (USMLE®) is a joint program of the FSMB and the NBME.



QUICK FACTS: *Eligibility for the USMLE Examinations*

STEP COMPONENT	REQUIREMENTS	ADDITIONAL INFORMATION
STEPS 1, 2 CK, AND 2 CS	<ul style="list-style-type: none"> Officially enrolled in, or a graduate of, a US or Canadian medical school leading to the MD degree (LCME accredited), OR Officially enrolled in, or a graduate of, a US medical school leading to the DO degree (AOA accredited), OR Officially enrolled in, or a graduate of, a medical school outside the US and Canada listed in the <u><i>World Directory of Medical Schools</i></u> as meeting ECFMG eligibility requirements; and meets other ECFMG criteria 	<ul style="list-style-type: none"> Must meet eligibility requirements at time of application AND on test day If you are dismissed or withdraw(n) from medical school, you are not eligible for the USMLE, even if you are appealing the school's decision or are otherwise contesting your status
STEP 3	<ul style="list-style-type: none"> Possess the MD degree (or its equivalent) or the DO degree from an LCME- or AOA-accredited US or Canadian medical school, or from a medical school outside the US and Canada listed in the <u><i>World Directory of Medical Schools</i></u> as meeting ECFMG eligibility requirements, AND Pass Step 1, Step 2 CK, and Step 2 CS, AND If you are a graduate of a medical school outside the US and Canada, possess the ECFMG certification. 	<ul style="list-style-type: none"> Must meet eligibility requirements prior to submitting your application

If you meet the eligibility requirements, you may take Step 1, Step 2 CK, and Step 2 CS in any sequence.
Please see pages 11-13 for more information regarding eligibility requirements.

RETAKES

You may take the same examination no more than three times within a 12-month period. Your fourth and subsequent attempts must be at least 12 months after your first attempt at that examination and at least six months after your most recent attempt at that examination.

If you have passed an examination, you are not permitted to retake a Step or Step Component, except to comply with certain requirements as approved by the USMLE governance.

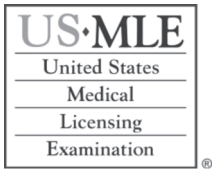
MULTIPLE ATTEMPTS AND TIME LIMITS

You are ineligible to take a Step or Step Component if you have made **six or more prior attempts** to pass that Step or Step Component, including incomplete attempts, regardless of when the examinations were taken.

Time limits to complete the USMLE, for purposes of licensure, are established by state medical boards; many require completion of all Steps or Step Components within seven years.

Information regarding specific state requirements can be obtained on the [FSMB website](#).

NOTE: If you are dismissed or withdraw(n) from medical school, you are not eligible for the USMLE, even if you are appealing the school's decision to dismiss you or are otherwise contesting your status. If you are on a leave of absence, please check with your registration entity before submitting your application; or if you have already registered, check before testing. Failure to notify your registration entity that you may no longer be eligible to take an examination may result in a determination of irregular behavior and a permanent annotation on your score reports and transcripts.



QUICK FACTS: *Applying and Scheduling*

STEP COMPONENT	APPLICATION AND SCHEDULING PROCESS	ADDITIONAL INFORMATION
<i>STEPS 1 AND 2 CK</i>	<ul style="list-style-type: none"> Students/graduates of LCME- or AOA-accredited programs should apply via the NBME Application website Students/graduates of medical schools outside the US/Canada should apply via the ECFMG Application website During the application process, select a three-month eligibility period during which you wish to test You will receive an e-mail notifying you that your scheduling permit is available Visit the Prometric website to schedule your test date 	<ul style="list-style-type: none"> You may be able to schedule your test date up to six months in advance If you are unable to test within your eligibility period, contact your registration entity (NBME or ECFMG) to inquire about a one-time eligibility period extension; a fee is charged for this service If you do not take the examination within your eligibility period, you must reapply with a new application and fee Your application fee is nonrefundable
<i>STEP 2 CS</i>	<ul style="list-style-type: none"> Students/graduates of LCME- or AOA-accredited programs should apply via the NBME Application website Students/graduates of medical schools outside of the US/Canada should apply via the ECFMG Application website You will be assigned a 12-month eligibility period, which begins upon acceptance and verification of your application You will receive an e-mail notifying you that your scheduling permit is available Visit the USMLE website to schedule your test date 	<ul style="list-style-type: none"> Once assigned, your eligibility period cannot be changed If you do not take the examination within your assigned eligibility period, you must submit a new application and fee Your application fee is nonrefundable
<i>STEP 3</i>	<ul style="list-style-type: none"> <i>All graduates</i> should apply for Step 3 via the FSMB website During the application process, select a three-month eligibility period during which you wish to test You will receive an e-mail notifying you that your scheduling permit is available Visit the Prometric website to schedule your test date 	<ul style="list-style-type: none"> You may be able to schedule your test date up to six months in advance If you are unable to test within your eligibility period, contact the FSMB to inquire about a one-time eligibility period extension; a fee is charged and restrictions may apply. Visit the FSMB website for more information If you do not take the examination within your eligibility period, you must reapply with a new application and fee Your application fee is nonrefundable

For information about how to request test accommodations or permission to bring medically necessary items with you on exam day, see the **Applying for the Test and Scheduling Your Test Date** section of this *BOI*.



QUICK FACTS: *Examination Day and Testing*

DO

- ✓ Review the USMLE *Rules of Conduct* prior to taking your examination
- ✓ Follow all test center staff instructions on the day of your examination
- ✓ Remember to bring a copy of your scheduling permit (electronic or paper) and required identification (see below); **you will not be permitted to test without them**
- ✓ Arrive 30 minutes prior to your testing appointment (computer-based examinations); for Step 2 CS, arrive at the time listed on your confirmation notice
- ✓ Confirm that your headphones are working, either before the examination begins or during the tutorial (computer-based examinations)
- ✓ Use personal items only when on an authorized break; you are not permitted to access your locker during unauthorized breaks (computer-based examinations)
- ✓ Be sure to complete all sections of the examination

DON'T

- ✗ Feel compelled to test if you are ill, under unusual stress or unprepared for the examination
- ✗ Bring family and friends to the center instead, arrange to meet them after the examination ends
- ✗ Bring unauthorized items to the testing room: for computer-based examinations, only soft-foam earplugs are allowed; for Step 2 CS, only your white lab coat and stethoscope are allowed
- ✗ Write on laminated note boards prior to entering your Candidate Identification Number (CIN) and starting your test session (computer-based examinations) or write on anything other than the laminated note boards
- ✗ Work past the announcements instructing you to stop
- ✗ Access your locker or use your cell phone on an unauthorized break

Please see pages 16-20 for more information regarding examination day rules and regulations.

Identification Required on Exam Day

You must present valid (unexpired) identification with:

- ✓ Your photo
- ✓ Your name as it appears on your permit
- ✓ Your signature

Your name, as it appears on your scheduling permit, must match the name on your identification exactly. If the name listed is not correct, contact your registration entity *immediately*.

Acceptable forms of identification include:

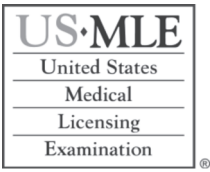
- ✓ Passport
- ✓ Driver's license with photograph
- ✓ National Identity Card
- ✓ Other dated, government-issued identification

Security Procedures on Exam Day

During check-in, you will:

- ✓ be scanned with a handheld or walk-through metal detector (computer-based examinations)
- ✓ be asked to empty and turn your pockets inside out
- ✓ place your personal belongings in bins that are inaccessible for the duration of the examination (Step 2 CS)
- ✓ have your photo identification checked
- ✓ be fingerprinted using biometric technology (computer-based examinations; not available at all locations)
- ✓ write your unique CIN as shown on your scheduling permit on one of the laminated note boards provided (computer-based examinations)

You will be asked to repeat much of this process each time you return to the testing room after a break.



QUICK FACTS: *Scoring and Score Reporting*

WHAT HAPPENS WHILE YOU WAIT FOR YOUR SCORES?

STEPS 1, 2 CK, AND 3

- ✓ After testing, the examination data are delivered electronically to the NBME
- ✓ Examinee responses are converted into a raw score (the sum of the points earned from correct responses)
- ✓ The raw score is converted into a three-digit score
- ✓ Analyses are performed to detect aberrant examinee response behavior. Candidates who are identified by these analyses may be asked to provide an explanation of their testing behaviors
- ✓ Final quality assurance procedures are performed to verify that the correct set of score reports is produced
- ✓ Score reports are then posted to the registration entity's (NBME, ECFMG, or FSMB) secure website and made available to examinees

STEP 2 CS

- ✓ Examinee test dates are batched into scoring cohorts that are usually eight weeks long
- ✓ Each day, after testing ends, the testing center performs quality control measures on the examination data before the information is delivered to the NBME
- ✓ Standardized Patient rating scales are converted to scores and patient notes are assigned to specially trained Patient Note raters
- ✓ When the test administration period for the cohort ends, the performance from the entire cohort is used to generate the data needed to ensure score comparability (across sites and administrations) and to report outcomes
- ✓ The results go through a final quality control process involving computation of statistical quality control measures
- ✓ Once results are verified and approved for release, the scores are made available as shown in the [Step 2 CS Score Reporting Schedule](#)

How Long Does it Take to Get Results?

Results for computer-based examinations (Steps 1, 2 CK, and 3) are typically available within three to four weeks after your test date. However, delays are possible for various reasons. In selecting your test date and inquiring about results, you should allow at least eight weeks to receive notification that your score report is available. For more specific information about potential scoring delays, please visit the Announcements section of the [USMLE website](#).

For Step 2 CS, refer to the [Step 2 CS Score Reporting Schedule](#).

When your score is available, follow the instructions in the e-mail notification for accessing your USMLE score report. The report will remain available for approximately 120 days from the date of the e-mail notification. After 120 days, your scores will be provided to you only in the form of an official USMLE transcript, which is available for a fee.

How to Receive/Send Transcripts

To obtain your USMLE transcript or have it sent to a third party, you must contact your registration entity; there is a fee for this service.

Please visit the [USMLE website](#) to determine which registration entity to contact to request your transcript and the fees associated with the service.

Your USMLE transcript includes: biographical information, complete examination history, and, if applicable, information regarding findings of irregular behavior and actions reported to the [FSMB Physician Data Center](#).

NOTE: The USMLE does not provide scores or outcomes by telephone, e-mail, or fax to anyone. The scoring process is not expedited or accelerated for any individual or group.



QUICK FACTS: *Irregular Behavior*

DO

- ✓ Put all personal belongings, including your cell phone and study materials, in the locker provided
- ✓ Access your personal belongings only during authorized breaks
- ✓ End your patient encounter and stop typing your Patient Note as soon as announcements are made (Step 2 CS only)
- ✓ Verify you are on an authorized break screen before leaving the examination room for a break
- ✓ **Contact the USMLE program via security@usmle.org or the [USMLE website](https://www.usmle.org) if you have evidence that someone may have violated a USMLE rule**

DON'T

- ✗ Ask people what they saw on their examination or share what you saw on yours, including on web forums
- ✗ Change any information on score reports, transcripts, or any other USMLE-related documents
- ✗ Write on your skin, tissue, or any surface other than the laminated note board provided to you by test center staff on your examination day
- ✗ Apply and/or sit for an examination if you are not a current student or a graduate of a medical school program, even if you are appealing your school's decision to withdraw or dismiss you
- ✗ Provide examination content to others, including test preparation companies or other entities

You are responsible for reading the *USMLE Bulletin of Information* in its entirety; contact the **USMLE Secretariat's** office with questions or concerns.

Please see pages 24-25 for more information regarding irregular behavior.



STOP! THINK BEFORE YOU ACT!

Irregular behavior includes, but is not limited to:

- Registering for or taking an exam when ineligible
- Seeking, providing, or obtaining prior access to exam content
- Altering exam scores
- Having unauthorized items in the testing area
- Using a proxy to take your exam
- Writing on anything other than the laminated note boards provided

The penalties for irregular behavior may include:

- Cancellation of your exam scores
- Ban on future testing
- Permanent annotation of your USMLE transcript
- Report to the FSMB's Physician Data Center
- Possible legal action

The USMLE program takes examination security seriously. If you have information concerning activities or behavior that may threaten the security or integrity of the USMLE, please contact us at security@usmle.org.

OVERVIEW

PURPOSE AND MISSION OF THE USMLE

The United States Medical Licensing Examination® (USMLE®) is a three-step examination for medical licensure in the United States and is sponsored by the Federation of State Medical Boards (FSMB) and the National Board of Medical Examiners® (NBME®). The USMLE program supports medical licensing authorities in the United States through its leadership in the development, delivery, and continual improvement of high-quality assessments across the continuum of physicians' preparation for practice.

EXAMINATION COMMITTEES

Examination committees, composed of medical educators and clinicians, create the examination materials. Committee members broadly represent the teaching, practice, and licensing communities across the United States. At least two committees critically appraise each test item or case, and revise or discard any materials that are in doubt.

OWNERSHIP AND COPYRIGHT OF EXAMINATION MATERIALS

The examination materials in the USMLE are the confidential, copyrighted property of the USMLE program. If you reproduce and/or distribute any examination materials, by any means, including by memorizing and reconstructing them, you are violating the legal rights of the USMLE program. The USMLE program will use every legal means available to protect the copyrighted materials and secure redress against those who violate copyright law.

THE USMLE: PURPOSE, TEST FORMAT, AND TEST LENGTHS

STEP & PURPOSE	FORMAT	LENGTH (including breaks)	ADDITIONAL INFORMATION
STEP 1 assesses the examinee's understanding of and ability to apply important concepts of the basic sciences to the practice of medicine, with special emphasis on principles and mechanisms underlying health, disease, and modes of therapy	<ul style="list-style-type: none"> Approximately 280 multiple-choice questions, divided into seven 60-minute blocks Computer based – administered at <u>Prometric Test Centers</u> around the world 	<ul style="list-style-type: none"> One day test session —Approximately— eight hours 	<i>For more information on Step 1, including applications, practice materials, and updates, visit the <u>USMLE website</u></i>
STEP 2 assesses the examinee's ability to apply medical knowledge, skills, and understanding of clinical science essential for the provision of patient care under supervision, with an emphasis on health promotion and disease prevention	Clinical Knowledge (CK) <ul style="list-style-type: none"> Approximately 318 multiple-choice questions, divided into eight 60-minute blocks Computer based – administered at <u>Prometric Test Centers</u> around the world 	<ul style="list-style-type: none"> One day test session —Approximately— nine hours 	<i>For more information on Step 2 CK, including applications, practice materials, and updates, visit the <u>USMLE website</u></i>

<p>The clinical skills examination is a separate component of STEP 2 that uses standardized patients to test examinees' ability to gather information from patients, perform physical examinations, and communicate their findings to patients and colleagues</p>	<p>Clinical Skills (CS)</p> <ul style="list-style-type: none"> 12 patient cases: 15 minutes for each patient encounter plus 10 minutes to record each patient note Administered at six test centers in the US – Atlanta, Chicago, Houston, Los Angeles, and Philadelphia (2) 	<ul style="list-style-type: none"> One day test session -Approximately eight hours 	<p><i>For more information on Step 2 CS, including applications, practice materials, and updates, visit the USMLE website</i></p>
<p>STEP 3 assesses the examinee's ability to apply medical knowledge and understanding of biomedical and clinical science, essential for the unsupervised practice of medicine, with emphasis on patient management in ambulatory settings</p> <p>Day 1: FOUNDATIONS OF INDEPENDENT PRACTICE (FIP) assesses the examinee's knowledge of basic medical and scientific principles essential for effective health care</p> <p>Day 2: ADVANCED CLINICAL MEDICINE (ACM) assesses the examinee's ability to apply comprehensive knowledge of health and disease in the context of patient management and the evolving manifestation of disease over time</p>	<p>Day 1 (FIP):</p> <ul style="list-style-type: none"> Approximately 235 multiple-choice test questions, divided into six 60-minute blocks, each containing approximately 40 questions Computer based – administered at Prometric Test Centers in the US <p>Day 2 (ACM):</p> <ul style="list-style-type: none"> Approximately 180 multiple-choice test questions, divided into six 45-minute blocks, each containing approximately 30 questions Thirteen computer-based case simulations (CCS). Each simulation is allotted a maximum of 10 or 20 minutes of real time Computer based – administered at Prometric Test Centers in the US 	<ul style="list-style-type: none"> One day test session -Approximately seven hours <ul style="list-style-type: none"> One day test session -Approximately nine hours 	<p><i>For more information on Step 3, including applications, practice materials, and updates, visit the USMLE website</i></p>

ELIGIBILITY FOR THE USMLE

WHO IS ELIGIBLE TO TAKE THE USMLE?

Step 1, Step 2 CK, and Step 2 CS

To be eligible, you must be in one of the following categories at the time you apply **AND** on the day of your examination:

- a medical student officially enrolled in, or a graduate of, a US or Canadian medical school program leading to the MD degree that is accredited by the Liaison Committee on Medical Education (LCME), or
- a medical student officially enrolled in, or a graduate of, a US medical school leading to the DO degree that is accredited by the American Osteopathic Association (AOA), or
- a medical student officially enrolled in, or a graduate of, a medical school that is outside the US and Canada, listed in the World Directory of Medical Schools as meeting ECFMG eligibility requirements, and that meets other eligibility criteria of the ECFMG.

IMPORTANT

Individuals who passed Step 2 prior to the implementation of Step 2 CS are not permitted to take Step 2 CK, except under the specific exceptions to the retake policy approved by the Composite Committee (see page 12). These individuals are permitted to take Step 2 CS, provided they meet all other eligibility requirements.

Individuals who were not required to pass Step 2 CS for Step 3 eligibility but who elect to take Step 2 CS and fail the examination are not eligible for Step 3 until they have passed Step 2 CS (most recent administration) and meet all other Step 3 requirements.

IMPORTANT

If you are dismissed or withdraw(n) from medical school, you are not eligible for the USMLE, even if you are appealing the school's decision or are otherwise contesting your status. If you are on a leave of absence, please check with your registration entity before submitting your application; if you have already registered, check with them before testing.

Step 3

To be eligible for Step 3, before submitting your application, you must:

- obtain the MD degree (or its equivalent) or the DO degree from an LCME- or AOA-Accredited US or Canadian medical school, or from a medical school outside the US and Canada that is listed in the World Directory of Medical Schools as meeting ECFMG eligibility requirements, AND
- pass Step 1, Step 2 CK, and Step 2 CS, AND
- additionally, for international medical graduates, obtain certification by the ECFMG.

IMPORTANT: The USMLE program recommends that, for Step 3 eligibility, applicants should have completed, or be near completion of, at least one postgraduate training year in a US-accredited graduate medical education program that meets state board licensing requirements.

CHANGE IN ELIGIBILITY STATUS

If your eligibility for a Step or Step Component changes after you submit your application but before your scheduled test date(s), you must notify your registration entity promptly. Failure to notify your registration entity that you may no longer be eligible to take the examination may result in a finding of irregular behavior. If you take a Step or Step Component for which you are not eligible, results for that examination may not be reported or, if previously reported, may be canceled.

GRADUATES FROM UNACCREDITED MEDICAL SCHOOLS IN THE US OR CANADA

If you graduated from an unaccredited medical school in the US or Canada and are eligible for initial licensure by a US medical licensing authority, you may take the USMLE only upon specific request by that medical licensing authority. The medical licensing authority should submit the request to sponsor you to the USMLE Secretariat in advance of your application for each Step.

SEQUENCE OF STEPS

If you meet the eligibility requirements, you may take Step 1, Step 2 CK, and Step 2 CS in any sequence. You may take Step 3 only after passing Step 1, Step 2 CK, and Step 2 CS.

NUMBER OF ATTEMPTS AND TIME LIMITS

The USMLE program limits to six the total number of times an examinee can take the same Step or Step Component. An examinee is ineligible to take a Step or Step Component after **six or more prior attempts** to pass that Step or Step Component, including incomplete attempts. All attempts at a Step or Step Component are counted toward the limit, regardless of when the examinations were taken.

Information regarding state-specific requirements for licensure can be obtained on the FSMB website. Note: MD/PhD students should reference the USMLE website for more specific information regarding exceptions to time limits.

RETAKE FAILED EXAMINATIONS

You may not take the same Step or Step Component more than three times within a 12-month period. Your fourth and subsequent attempts must be at least 12 months after your first attempt at that examination and at least six months after your most recent attempt at that examination.

RETAKING PREVIOUSLY PASSED STEPS

If you pass a Step or Step Component, you are not allowed to retake it, except to comply with the time limit of a medical licensing authority or another authority recognized by the USMLE program. Visit the [USMLE website](#) for more information. If you have not yet passed Step 3 and need to retake a previously passed Step 1 or Step 2 examination in order to meet a time limit imposed by a US medical licensing authority or another authority recognized by the USMLE program, you should understand that if you fail a retake, you will no longer be eligible to take Step 3. In order to meet the examination requirements for Step 3 eligibility, you must have achieved a passing performance on the *most recent administration* of the examinations intended to meet those requirements.

PREVIOUSLY LICENSED PHYSICIANS

If you have already been granted a license by a US medical licensing authority based on previous licensure examinations, such as the Federation Licensing Examination (FLEX) or the NBME certifying examinations, you are not eligible to take the USMLE.

APPLYING FOR THE TEST AND SCHEDULING YOUR TEST DATE

APPLICATION MATERIALS

Step 1, Step 2 CK, and Step 2 CS

Students and graduates of LCME- or AOA-Accredited programs should apply for Step 1, Step 2 CK, and Step 2 CS by following the instructions on the [NBME website](#). Students and graduates of medical schools outside the US and Canada should apply for Step 1, Step 2 CK, and Step 2 CS by following the instructions on the [ECFMG website](#).

IMPORTANT

If you are dismissed or withdraw(n) from medical school, you are not eligible for USMLE, even if you are appealing the school's decision or are otherwise contesting your status.

Step 3

Graduates with an MD or DO degree from an LCME- or AOA-Accredited medical school, and graduates of medical schools outside the US and Canada that are listed in the [World Directory of Medical Schools](#) as meeting ECFMG eligibility requirements, should apply for Step 3 by following the instructions on the [FSMB website](#).

EXAMINEES WITH DISABILITIES REQUESTING TEST ACCOMMODATIONS

The USMLE program provides reasonable accommodations for examinees with disabilities under the Americans with Disabilities Act (ADA). If you are an individual with such a disability and require test accommodations, visit the [USMLE website](#) before you apply for each Step or Step Component for information regarding test accommodations, including procedures and documentation requirements.

EXAMINEES WHO REQUIRE ADDITIONAL BREAK TIME

Examinees with physical or health conditions who require additional break time should complete the request [form](#) and submit it with a letter from a qualified health care professional documenting the medical need. Examples include lactation (to express breast milk) and diabetes (to monitor/treat blood glucose). Requests for additional break time should be made prior to, or at the same time as, registration for a Step examination.

PERSONAL ITEM EXCEPTIONS (PIE)

Unauthorized possession of personal items while you are in the secure areas of the testing center is prohibited. Exceptions to this policy may be made in certain limited circumstances. A list of approved personal items permitted in the secure testing area (subject to inspection by test center staff) is available at the [USMLE website](#).

OBTAINING AN ELIGIBILITY PERIOD AND SCHEDULING YOUR TEST DATE

STEP COMPONENT	OBTAINING AN ELIGIBILITY PERIOD AND SCHEDULING YOUR TEST DATE	ADDITIONAL INFORMATION
<i>STEPS 1 AND 2 CK</i>	<ul style="list-style-type: none"> When applying for the examination, you must select a three-month eligibility period during which you wish to test (e.g., January – March). Once your registration is complete, a scheduling permit with your eligibility period will be issued. You will receive an e-mail with instructions for accessing your permit. After obtaining the scheduling permit, you may visit the Prometric website to schedule a test date. Scheduling may not be available more than six months in advance. 	<ul style="list-style-type: none"> You are permitted to reschedule within your eligibility period; however a <u>fee</u> is charged if a change is made during the 30 calendar days before your scheduled appointment. If you are unable to test within your eligibility period, <u>contact</u> your registration entity to inquire about a one-time contiguous eligibility period extension. A fee is charged for this service. If you do not take the examination within your original or extended eligibility period, you must reapply by submitting a new application and fee(s). <u>Fees</u> are nonrefundable and nontransferable.
<i>STEP 2 CS</i>	<ul style="list-style-type: none"> When you apply for Step 2 CS, you are assigned a 12-month eligibility period that begins when your application is accepted and your eligibility is verified. Once your registration is complete, a scheduling permit with your eligibility period will be issued. You will receive an e-mail with instructions for accessing your permit. After obtaining the scheduling permit, you may visit the USMLE website to schedule your test date. 	<ul style="list-style-type: none"> Once your eligibility period is assigned, it cannot be changed or extended. Please check the Step 2 CS Score Reporting Schedule before scheduling a testing appointment if you need your results by a specific deadline. You are permitted to reschedule within your eligibility period; however a <u>fee</u> is charged if a change is made during the 14 calendar days before your scheduled appointment. If you do not take the examination within your eligibility period, you must reapply by submitting a new application and examination fee. <u>Fees</u> are nonrefundable and nontransferable.
<i>STEP 3</i>	<ul style="list-style-type: none"> When applying for an examination, you must select a three-month eligibility period during which you wish to test (e.g., January – March). Once your application is processed, a scheduling permit with your eligibility period will be issued. You will receive an e-mail with instructions for accessing your permit. After obtaining the scheduling permit, you may visit the Prometric website to schedule your test dates. 	<ul style="list-style-type: none"> You are permitted to reschedule within your eligibility period; however a <u>fee</u> is charged if a change is made during the 30 calendar days before your scheduled appointment. If you are unable to test within your eligibility period, contact FSMB to inquire about a one-time contiguous eligibility period extension. A fee is charged for this service. Visit the FSMB website for more information on eligibility period extensions. If you do not take the examination within your original or extended eligibility period, you must reapply by submitting a new application and fee(s). <u>Fees</u> are nonrefundable and nontransferable.

IMPORTANT: You should not feel compelled to test on a particular day if you are ill, under unusual personal stress, unprepared for the examination, or otherwise not ready to test. Contact your registration entity for further details regarding rescheduling your examination.

EXAMINATION DAY AND TESTING

TESTING REGULATIONS AND RULES OF CONDUCT

Testing sessions for the USMLE Steps are monitored by test center staff, in person and through audio and visual recording. Staff are required to report any violations of USMLE or test center rules. You must follow instructions from test center staff throughout the examinations; failure to do so may result in a finding of irregular behavior and permanent annotation of your transcript. Test center staff are not authorized to answer questions regarding registration, examination content or format, testing software, scoring, or retesting.

RULES OF CONDUCT

When you apply to take the USMLE, you are agreeing to the following:

1. You are the person named on the scheduling permit for the examination.
2. You will not seek, provide, or obtain any form of unauthorized assistance during the examination or during breaks.
3. You will not have prohibited materials, including formulas, study materials, notes, papers, or electronic devices of any kind, in your possession while you are in the secure areas of the test center.
4. You will place in a locker or cubicle all personal belongings, including cell phones, watches, pagers, tablet PCs, iPods/media players, fitness and tracking monitors, any device with transmitting or receiving capabilities (e.g., bluetooth), formulas, study materials, notes, papers, pens/pencils, and your purse and/or wallet, before you enter the testing room (or "orientation room" for Step 2 CS).
5. During computer-based testing (Steps 1, 2 CK, and 3), you will leave your testing station for breaks only when the break screen is visible on your monitor. It is a violation of the Rules of Conduct if you indicate on the test center log that your break screen is visible when it is not.
6. During computer-based testing (Steps 1, 2 CK, and 3), you may use a telephone or other communication device only when outside the secure testing area and during an authorized break. During Step 2 CS, you will not use a personal telephone at anytime while you are in the testing center.
7. You will not remove test content from the test center by any means.
8. You will maintain the confidentiality of the materials, including, but not limited to, the multiple-choice items and the case content for Step 2 CS and *Primum* CCS. You will not reproduce or attempt to reproduce examination materials through recording, memorization, or any other means. Also, you will not provide information relating to examination content to anyone who may be taking or preparing others to take the examination. This includes postings regarding examination content and/or answers on the Internet.
9. You will not write on anything other than the laminated note boards (computer-based examinations) or scrap paper (Step 2 CS) provided.

IMPORTANT: If you violate these Rules of Conduct, you may be directed to leave the test center before completing your examination. Also, evidence of violation of any test administration rule, including these Rules of Conduct, will result in actions being taken under the USMLE Policies and Procedures Regarding Irregular Behavior. If you are found to have engaged in irregular behavior, your score report and transcripts will include this finding, you may be barred from taking the USMLE in the future, and your score may be canceled.

PERSONAL BELONGINGS – WHAT YOU CAN BRING INTO THE TESTING ROOM

Personal items are prohibited in the secure areas of the testing center. **For computer-based examinations (Step 1, Step 2 CK, and Step 3), the only items you are allowed to bring into the testing room are soft-foam earplugs without strings.** Earplugs must be removed from the packaging and be ready for inspection by test center staff during check-in and must also remain at your workstation during all breaks. Visit the [USMLE website](#) for more information.

For Step 2 CS, the entire test center, including the orientation room and the restrooms, is considered a secure testing area. **The only items you are allowed to bring into the secure testing area are your white lab coat (pockets must be empty) and your personal stethoscope (there is a limited supply at the test center).** All other equipment, including pens, gloves, writing paper, and other medical equipment, is provided by the test center. Visit the [USMLE website](#) for more information regarding the Step 2 CS examination experience and test center regulations.

For all Steps, if you bring personal items to the test center, you must store them in a small designated locker outside the secure testing area or in the designated storage area for Step 2 CS; electronic devices must be turned off. All personal items are subject to inspection.

ADMISSION TO THE TEST

Check-in Procedures

Step 1, Step 2 CK, Step 3

You should arrive at the test center approximately 30 minutes prior to your scheduled testing appointment. If you arrive after your appointment time, you may not be admitted. If you arrive more than 30 minutes after your scheduled testing appointment, you will **not** be admitted and must pay a fee to reschedule your test. Your rescheduled test date(s) must fall within your eligibility period.

Step 2 CS

You should arrive at the test center at the time listed on the confirmation notice you will have printed after scheduling your appointment. There will be an onsite orientation to demonstrate the equipment available for you to use in the examination rooms and to review examination rules and procedures. If you arrive during the onsite orientation, you may be allowed to test after signing a Late Admission Form. If you arrive after the onsite orientation, you will **not** be allowed to test and must pay a fee to reschedule your test.

All Steps

When you arrive at the test center, you must present a paper or electronic copy of your **scheduling permit** and the **required identification** as described on your scheduling permit. Acceptable forms of unexpired identification include:

- Passport
- Driver's license with photograph
- National Identity Card
- Other form of dated, unexpired, government-issued identification

Your name, as it appears on your scheduling permit, must exactly match the name on your form(s) of identification. Your identification must contain both your signature and a recent photograph. Please review your scheduling permit for details and limited exceptions. If the name listed on your scheduling permit is not correct, contact your registration entity immediately.

If you do not bring your scheduling permit on paper or electronically (e.g., via smartphone) and acceptable identification on each day of your exam, you will not be admitted to the test and will be required to pay a fee to reschedule your test. Your rescheduled test date(s) must fall within your eligibility period.

Security Procedures

For Step 1, Step 2 CK, and Step 3 ONLY

During check-in, test center staff will scan you with a metal detector (handheld or walk-through) and ask you to empty and turn your pockets inside out before entering the testing room to confirm that you have no prohibited items. You will be asked to repeat this process each time you return to the testing room after a break. Additionally, your photo ID and fingerprint may be scanned electronically and you must sign the test center log each time you enter or exit the test room.

Before you enter the test room, test center staff will give you laminated writing surfaces and markers to use for making notes and/or calculations during the testing session. You will be instructed to write your name and CIN, as shown on your scheduling permit, on one of the laminated writing surfaces provided. Writing surfaces and markers should be used only at your assigned testing station, and only after you have entered your CIN in the computer to start your test session. If you have filled the laminated writing surfaces and need additional space for making notes, raise your hand to ask test center staff for a replacement. You must return laminated writing surfaces to test center staff at the end of the testing session. **Do NOT write on anything other than the laminated writing surface (e.g., your hand, other body part, tissue, etc.). Failure to comply may result in a finding of irregular behavior.**

Test center staff will escort you to your assigned testing station and provide brief instructions on use of the computer equipment. You must enter your CIN to start the examination. A brief tutorial is available before each examination. It is important that you run the sound check for the audio headphones either before the examination begins or during the tutorial, so that problems can be resolved before you start the examination.

For Step 2 CS ONLY

During check-in, in addition to having your photo ID scanned electronically, you will be asked to place your personal belongings (e.g., pens, study materials, cell phones, etc.) in small bins, which are inaccessible for the duration of the examination day. Any personal belongings that you may need during breaks or during the examination, including your lab coat and stethoscope, can be placed at your seat in the orientation room.

Please note that every area of the testing center is under video surveillance at all times; examinees are escorted by proctors at all times, with the exception of restroom breaks.

All Steps

There are no facilities available for family and friends to wait at the center while you test; plan to meet them elsewhere after the examination ends. All examinees will be required to remove eyeglasses for close visual inspection by the test center administrator. These inspections will take a few seconds and will be done at check-in and upon return from breaks. Jewelry, except for wedding and engagement rings, is prohibited. Hair accessories are subject to inspection. You should not wear ornate clips, combs, barrettes, headbands, or other hair accessories.

BREAK TIME

Step 1, Step 2 CK, and Step 3

Your test session is scheduled for a fixed amount of time and the computer keeps track of the time allocated for each block and for breaks. At the start of the testing session, you have a total of 45 minutes of break time for authorized breaks and for computer transitions between blocks. Authorized breaks include any time you spend between test blocks, whether you remain at your seat or leave the testing room. If you complete the tutorial or other testing blocks early, the remaining time will be added to your total break time.

Once you begin a testing block, you may not leave the room (except in the event of an emergency). If you leave the room for a personal emergency and you are not on an authorized break, the block and daytime clocks will continue to run and the test center will report the incident to the USMLE program. Additionally, the unauthorized break screen, described in the examination tutorial, will appear on the monitor after a defined period of inactivity. After the unauthorized break screen appears, you will need to enter your CIN to continue with the examination. Each time you leave the testing room, you are required to sign out and sign in when you return. You must present your identification each time you sign in.

If you exceed your allocated or accumulated break time, the excess will be deducted from your total testing time. Use the time summary feature (explained in the tutorial on test day) to keep track of your time.

Step 2 CS

Your Step 2 CS administration will include 12 patient encounters. The examination session lasts approximately eight hours. Examinees get a minimum of 45 minutes of break time, which includes a 30-minute lunch period. During lunch, a light meal will be served. The test center is unable to accommodate special meal requests. However, you may bring your own food, provided that no refrigeration is required. The frequency and length of breaks, other than the lunch break, will vary slightly by testing center. Smoking is prohibited throughout the centers.

STARTING AND COMPLETING THE TEST

Step 1, Step 2 CK, and Step 3

After you start taking an examination, you cannot cancel or reschedule that examination. If you experience a computer issue during the test, notify test center staff immediately. The testing software is designed to restart the test at the point that it was interrupted, without loss of time.

The test session ends when you have started and exited all blocks or the total test time expires. You will receive a notice during checkout that you have appeared for the test. If your test is scheduled for multiple days, be sure to bring a copy of your permit with you each day or you may not be permitted to test.

In the rare event that a technical problem occurs that does not permit you to complete your examination, please send a written description of the incident to Test Administration Services at the NBME. Test Administration Services must receive your notice within 10 days of your testing date or it may not be possible to fully investigate your concerns. Your correspondence should include your name, your USMLE ID number, the examination name (Step 1, 2 CK, 2 CS, or 3), date of administration, and a message with a detailed description of the difficulty experienced. Please allow at least 15 business days for your report to be investigated and evaluated. You will receive written notification of the investigation results.

If you start the examination but do not complete it for reasons other than a technical problem or expiration of time, you should promptly write to Test Administration Services explaining, in detail, the reasons you decided not to finish the examination. The attempt may appear as an “incomplete” on your USMLE transcript.

For more information on how to report a test administration problem, visit the USMLE website.

Step 2 CS

Once you enter the secure area of the test center, which includes the orientation area, you may not leave the area until the examination has been completed. All examinees taking the Step 2 CS examination are required to type the patient note portion of the exam. You are only permitted to handwrite your patient note if you were approved to receive an accommodation for a disability, or if technical difficulties occur that make the patient note-typing program unavailable.

You may not discuss the cases with anyone, including other examinees, at any time (before, during, or after your examination). All conversation at the testing center among examinees must be in English.

IMPORTANT

The USMLE program may prohibit an examinee from completing the exam and/or may impose conditions on retesting if the examinee appears to represent a health or safety risk to the standardized patients or test center staff. Such circumstances include, but are not limited to, an examinee performing careless or hazardous acts during the physical examination, exhibiting signs of illness (e.g., persistent coughing or sneezing) during the examination, or showing visibly open skin lesions or active bleeding.

If you do not feel well on the day of your test, we strongly encourage you to consider rescheduling your examination. If you become ill during your exam, inform a proctor promptly.

IMPORTANT

The USMLE makes every effort to ensure that your registration information is properly processed and that the Step examinations are properly prepared, administered, and scored. In the unlikely event that an error occurs in the preparation, processing, administration, or scoring of your USMLE examination or in the reporting of your USMLE scores, the USMLE will make reasonable efforts to correct the error, if possible, or permit you either to retest at no additional fee or to receive a refund of the examination fee. These are the exclusive remedies available to examinees for errors in the registration process; in preparing, processing, or administering exams; or in determining or reporting scores.

SCORING AND SCORE REPORTING

EXAMINATION RESULTS AND SCORING

For up-to-date information on minimum passing scores, examination performance data, and general scoring methodology, please visit the [USMLE website](#).

SCORE REPORTING

Score Availability

Results for computer-based examinations (Step 1, Step 2 CK, and Step 3) are typically available three to four weeks after your test date. However, release of results may take longer for various reasons. When selecting your test date and inquiring about results, you should allow at least eight weeks to receive notification that your score report is available. For Step 2 CS results, you should refer to the [Step 2 CS Score Reporting Schedule](#). For more specific information about potential scoring delays, please visit the Announcements section of the [USMLE website](#).

When your score is available, you will receive an e-mail notification from your registration entity. Your score report will remain available on your registration entity's website for approximately 120 days from the date of the e-mail notification. After the score report is removed from the website, your scores will only be provided to you in the form of an official transcript, for a fee, through your registration entity. Visit the [USMLE website](#) for more details, including how to request a transcript for you or for a third party.

Reporting to Third Parties

The NBME reports the results of the USMLE to LCME- and AOA-accredited medical school programs for their students and graduates. For Step 1, Step 2 CK, and Step 2 CS, if you do not want your results reported to your medical school, you must send a signed request to the [NBME](#), which must be received at least 10 business days before your scheduled test date. For Step 3, you must indicate your reporting preference on your application.

The ECFMG may provide the results of the USMLE to international medical schools for their students and graduates. For Step 1, Step 2 CK, and Step 2 CS, if you do not want your results reported to your medical school, you must submit a request for each examination administration, via the [ECFMG website](#), at least 10 business days before your scheduled test date.

Examination data (including performance information and recorded patient encounters) from USMLE examinations may be used by the USMLE program or made available to third parties for research and other purposes in the legitimate interests of the USMLE program. In such instances, the data will be confidential, and individual examinees will not be identified. If you do not wish your examination data to be made available for such purposes, you must advise the [USMLE Secretariat](#) in writing no later than 30 days before your administration.

Incomplete Scores

If you do not open every block of your Step 1, Step 2 CK, or Step 3 examination, your examination may not be scored and the attempt may be reported as an "incomplete" on your USMLE transcript.

For Step 2 CS, if you leave the test early or otherwise fail to carry out one or more of the cases, your performance may be assessed on those cases you completed. If, based on the performance of the completed cases, a pass/fail determination cannot be made, the attempt may be recorded as an incomplete on your USMLE transcript.

To avoid misinterpretation and to protect your privacy, the USMLE program does not provide scores or outcomes by telephone, e-mail, or fax to anyone. Additionally, the scoring process is not expedited or accelerated for any individual or group.

SCORE RECHECKS

For all Steps and Step Components, a change in your score or in your pass/fail outcome based on a recheck is an extremely remote possibility. A rigorous process is used, including a double scoring method involving independent scoring systems, to ensure accurate results; to date, the score recheck process has not resulted in a score change. However, a recheck will be performed if you submit a written request and service fee to your registration entity. Your registration entity must receive the request no later than 90 days after your result was released to you.

REGISTRATION ENTITY	TO REQUEST A SCORE RECHECK, VISIT:
NBME	http://examinee.nbme.org/interactive
ECFMG	http://www.ecfm.org/forms/steprchk.pdf
FSMB	http://www.fsmb.org/licensure/usmle-step-3/cost-and-fees

For Step 1, Step 2 CK, and Step 3, when a request for a score recheck is received, the original response record is retrieved and rescored using a system that is outside of the normal processing routine. The rechecked score is then compared with the original score.

For Step 2 CS, the ratings received from the standardized patients and from the Physician Note raters are retrieved, resummed, and reconverted into final scores to verify the accuracy of the original outcome. Encounters and patient notes are not re-rated and videos are not rereviewed during the recheck.

SCORE VALIDITY

The performance of examinees is monitored and may be analyzed to detect aberrancies that raise questions about the validity of scores. The USMLE program reserves the right to cancel scores that are at or above the passing level if the USMLE program has a good faith basis for questioning whether they represent a valid measure of knowledge or competence as sampled by the examination. Questions about score validity may result from irregular behavior (please refer to the **Irregular Behavior** section of this *BOI* on pages 24-25) or other factors. If there are questions related to the validity of your score, your score report may be delayed, or any further reporting or verification of such scores may be withheld, pending completion of further review and/or investigation. You will have an opportunity to provide information that you consider relevant.

After review and analysis of all available information, scores will either be classified as valid and will be reported, or scores will be canceled and will not appear on your record. If scores are canceled, you will be advised of the options for retaking the examination. Anyone who has received a report of scores that are later canceled will be notified.

ANOMALOUS PERFORMANCE

Anomalous performance and/or unusual testing history may impact your access to the USMLE. If your performance raises concerns about your readiness to test or your motivation to pass, the USMLE program reserves the right to restrict your future access to its examinations and/or to impose conditions on future access. Do not test if you are not able or not ready on your scheduled test date.

IMPORTANT

You must pass all three subcomponents of Step 2 CS (ICE, CIS, SEP) in a single administration to obtain the overall designation of passing on Step 2 CS.

IMPORTANT

Taking a Step examination to familiarize yourself with the examination format, or for any reason other than to pass, is prohibited and may limit your future access to the USMLE.

IRREGULAR BEHAVIOR

IRREGULAR BEHAVIOR DEFINED

Irregular behavior includes any action by applicants, examinees, potential applicants, or others that could compromise the validity, integrity, or security of the USMLE examination process.

IMPORTANT

If you have information that an examinee or other person or entity has, or may have, compromised the security of the USMLE or intended to do so, please contact the USMLE or call your registration entity immediately.

EXAMPLES OF IRREGULAR BEHAVIOR

Specific examples of conduct that may be deemed to be irregular behavior include, but are not limited to, the following:

- seeking, providing, and/or obtaining unauthorized access to examination materials
- providing false information or making false statements on or in connection with application forms, scheduling permits, or other USMLE-related documents
- taking or attempting to take an examination for which you are not eligible
- taking an examination for someone else or engaging someone to take an examination for you
- seeking, providing, or obtaining unauthorized assistance during the examination or attempting to do so
- making notes of any kind while in the secure areas of the test center, except on the writing materials provided at the test center for this purpose
- failing to adhere to any USMLE policy, procedure, or rule, including instructions of the test center staff
- verbal or physical harassment of test center staff or other examination staff, or other disruptive or unprofessional behavior during the registration, scheduling, or examination process
- possessing any unauthorized materials, including, but not limited to, photographic equipment, communication or recording devices, fitness and tracking monitors, and cell phones, in the secure testing areas
- altering or misrepresenting examination scores or outcomes
- unauthorized reproduction by any means, including, but not limited to, reconstruction through memorization and/or dissemination of copyrighted examination materials by any means, including the Internet
- communicating or attempting to communicate about specific test items, cases, and/or answers with another examinee, potential examinee, or formal or informal test preparation group at any time before, during, or after an examination
- failure to cooperate fully in any investigation of a violation of the USMLE rules

IMPORTANT

Test preparation courses and materials are available from individuals and companies not associated with the USMLE. It is unlawful for any test preparation service or program to use, disclose, distribute, or solicit content from recent test takers, or to otherwise provide access to questions or answers from actual USMLE examinations. If there is evidence that you enrolled in, participated in, or used any test preparation program or service that distributes, provides access to, or uses the USMLE questions or answers, or provides a forum for others to share such information, your registration and/or testing may be canceled, your scores on the USMLE may be withheld or canceled, and you may be subject to further sanctions.

IRREGULAR BEHAVIOR – INVESTIGATION PROCESS

If the USMLE program receives information suggesting that an individual has engaged in irregular behavior the USMLE program will conduct an investigation. During this time, anyone alleged to have engaged in such activity will be prohibited from registering for additional exams; previously unreleased scores, if any, may be withheld; and pending examination appointments will be canceled. If the evidence suggests that the alleged irregular behavior affects score validity, the score will also be reviewed as described in the **Scoring and Score Reporting** section of this *BOI* (pages 21-23).

If you are the subject of a USMLE investigation, you will be advised of the matter and will have an opportunity to provide information that you consider relevant. Individuals who are the subject of an investigation must cooperate fully with the investigation, including providing all requested documentation and answering truthfully all questions posed during investigative interviews conducted on behalf of the USMLE program. If requested, individuals who are the subject of our investigation shall provide a signed release authorizing the USMLE program to obtain information and records from educational institutions and other third parties. Failing to cooperate with an investigation or providing misleading or untruthful information in the course of an investigation will constitute irregular behavior that may be the basis of separate proceedings or other actions by the USMLE program.

If it is determined that you engaged in irregular behavior, information regarding this determination will become part of your permanent USMLE history. Your score report (if applicable) and USMLE transcript will contain a notation of the finding of irregular behavior. The USMLE program will provide information about the irregular behavior to third parties that receive or have received your USMLE transcript and may also report to other legitimately interested entities, as determined by the USMLE program. You may be barred from taking future examinations and/or special administrative procedures or conditions may be implemented for your future examinations. The USMLE program also reserves the right to take such action when information regarding irregular behavior on predecessor examinations suggests that such actions may be appropriate to ensure the security of the USMLE.

COMMUNICATING WITH THE USMLE PROGRAM

APPLICATION AND REGISTRATION INQUIRIES

Contact the appropriate registration entity (see below) for information on how to apply for the USMLE, obtain application materials, and receive information on the status of your application and scheduling permit.

EXAMINATION	TYPE OF APPLICANT	REGISTRATION ENTITY AND CONTACT
<i>STEPS 1, 2 CK, AND 2 CS</i>	Students and graduates of medical school programs in the US or Canada accredited by the LCME or students and graduates of medical schools in the US accredited by the AOA	NBME 3750 Market Street Philadelphia, PA 19104-3102 Website: http://www.nbme.org Telephone: (215) 590-9700 Fax: (215) 590-9460 E-mail: webmail@nbme.org
<i>STEPS 1, 2 CK, AND 2 CS</i>	Students and graduates of medical schools outside the US and Canada	ECFMG 3624 Market Street Philadelphia, PA 19104-2685 Website: http://www.ecfm.org Telephone: (215) 386-5900 Fax: (215) 386-9196 E-mail: info@ecfm.org
<i>STEP 3</i>	All medical school graduates who have passed Step 1 and Step 2 (CK and CS)	FSMB Assessment Services 400 Fuller Wiser Road Euless, TX 76039-3856 Website: http://www.fsmb.org Telephone: (817) 868-4041 Fax: (817) 868-4098 E-mail: usmle@fsmb.org

SCHEDULING AND TEST CENTER INQUIRIES

For Steps 1, 2 CK, and 3, your scheduling permit includes instructions on how to contact [Prometric](#) to schedule your appointment to test. Inquiries about your appointment, such as a request to reschedule an appointment within your eligibility period, must be directed to Prometric. Visit the [Prometric website](#) for information on test center locations.

To schedule an appointment for Step 2 CS, follow the instructions provided on your scheduling permit. To check test center availability and to schedule or reschedule an appointment, visit the [USMLE website](#).

If you receive a scheduling permit but experience a problem scheduling your appointment that Prometric or CSEC scheduling staff are unable to resolve, you may contact your registration entity.

TEST ADMINISTRATION INQUIRIES

For questions and concerns about your administration, contact the NBME Test Administration office.

Attention: Test Administration

National Board of Medical Examiners
3750 Market Street
Philadelphia, PA 19104-3102
Telephone: (215) 590-9700
Fax: (215) 590-9457
E-mail: testadmin@nbme.org

SECURITY CONCERNS

USMLE encourages you to provide information about cheating and other activities of which you are aware that may compromise the security and integrity of the USMLE. Please visit the USMLE website to report such information.

GENERAL INQUIRIES

Complete information about the USMLE is available on the USMLE website. General inquiries regarding the USMLE or inquiries for the USMLE Secretariat may be directed to:

Attention: USMLE Secretariat

3750 Market Street
Philadelphia, PA 19104-3102
Telephone: (215) 590-9700
E-mail: webmail@nbme.org

LIST OF ABBREVIATIONS

ACM	Advanced Clinical Medicine
ADA	Americans with Disabilities Act
AOA	American Osteopathic Association
CCS	Computer-based Case Simulations
CIN	Candidate Identification Number
CK	Clinical Knowledge
CS	Clinical Skills
CSEC	Clinical Skills Evaluation Collaboration
ECFMG	Educational Commission for Foreign Medical Graduates
FLEX	Federation Licensing Examination
FSMB	Federation of State Medical Boards
FIP	Foundations of Independent Practice
LCME	Liaison Committee on Medical Education
NBME	National Board of Medical Examiners
PIE	Personal Item Exception
USMLE	United States Medical Licensing Examination

EXHIBIT B

***United States Medical Licensing Examination (USMLE)
Policies and Procedures Regarding Irregular Behavior***

Introduction

The following policies and procedures regarding irregular behavior are intended to protect the integrity of the USMLE examination program. If the irregular behavior creates a good faith basis for questioning the validity of an examinee's scores, the policies and procedures described in another document, entitled *USMLE Policies and Procedures Regarding the Validity of Passing Level Scores*, may also be applicable.

A. Policies

1. *Irregular behavior* includes all actions or attempted actions on the part of applicants, examinees, potential applicants, or others that could subvert the examination process. Examples of irregular behavior include, but are not limited to: failing to comply with any USMLE policy, procedure, and/or rule; seeking and/or obtaining unauthorized access to examination materials; providing false information; impersonating an examinee or having someone else test in one's place; giving assistance to or receiving assistance from another individual in answering test items; possessing unauthorized items, equipment or materials during an examination; altering or misrepresenting examination scores; engaging in disruptive or unprofessional behavior at a test center; theft of examination materials; unauthorized reproduction by any means and/or dissemination of examination content or other copyrighted materials; posting or discussing examination content on any website, or asking others to do so; and taking any other action that could give an inappropriate advantage to individuals who might be taking the examination.
2. If the USMLE Committee for Individualized Review ("CIR") determines that irregular behavior has occurred, an annotation to that effect will be entered in the USMLE record of the examinee, and this annotation will appear on applicable score reports (if scores are reported) and on transcripts for that examinee. Information regarding the decision of the CIR and the basis for such decision may also be provided to legitimately interested entities, including the Federation of State Medical Boards' Physician Data Center.
3. If the CIR determines, in its discretion, that an individual engaged in irregular behavior that is sufficiently serious to warrant such action, the individual may be barred from future administrations of USMLE or subjected to special procedures for taking future USMLE examinations, in addition to being subject to the actions described in Paragraph A.2, above.

4. A CIR finding of irregular behavior may be appealed by the affected individual to the USMLE Composite Committee in accordance with Paragraph B.8, below. The pendency of an appeal, however, will not stay or delay implementation of the CIR's decision.

B. Procedures

1. After acquiring information suggesting irregular behavior on the part of an individual from third-party reports, statistical analysis, fact investigation, or otherwise, staff will assess whether there is sufficient evidence to conclude that irregular behavior may have occurred. Staff will conduct a follow-up investigation to gather additional information when necessary.
2. If the staff analysis and/or follow-up investigation will not be concluded until after the typical period for the reporting of scores, the examinee and the entity to which scores would normally be reported will be notified that the reporting of the scores in question is being delayed pending further review.
3. If, at the conclusion of its investigation and analysis, staff finds that there is a reasonable basis to conclude that an individual has engaged in irregular behavior, the matter will be referred to the CIR. If the individual is an examinee, his/her scores will be withheld if not already released, and the individual might not be permitted to sit for subsequent examinations, nor will Step applications be processed, pending a decision by the CIR.
4. If a potential irregular behavior incident is referred to the CIR, the individual involved will be notified using the individual's last known email and postal address and provided with a copy of the applicable USMLE policies and procedures. The individual will be advised of the information which initiated the investigation and relevant findings of the investigation. The individual will be given an opportunity to provide an explanation for the facts described in the findings and to present other relevant information. The individual may request the opportunity to appear personally before the CIR. If the individual involved appears personally before the CIR, the oral presentation will be made under oath and a stenographic or audio recording may be made at the election of the CIR.
5. The CIR will consider all available pertinent information in deciding whether an individual engaged in irregular behavior, including the record assembled by staff, statistical analyses employed by staff (if any), and any explanation or other information that the individual may provide. If the CIR determines that there is a good faith basis for concluding that irregular behavior has occurred, the affected individual will be notified and informed of the right to appeal the CIR decision in accordance with Paragraph B.8, below. Regardless of whether an appeal is taken, an annotation indicating the nature of the irregular behavior will be entered immediately in the individual's USMLE record. This annotation will appear on the applicable score report (if scores are released) and on transcripts for the

individual. At the discretion of the CIR, information regarding a CIR finding of irregular behavior may also be provided to legitimately interested entities, including but not limited to the entity that certified the individual's eligibility for the examination in question, a medical education or training program in which the individual has participated or is participating at the time of the CIR's decision, and/or the FSMB's Physician Data Center. All medical licensing authorities that have received a score report or transcript for this individual in the past will receive an updated transcript and/or score report which reflects the CIR's decision.

6. If suspected irregular behavior raises concerns about the validity of a USMLE score, staff and/or the CIR may elect to review the matter and to proceed under these policies and procedures and/or under the *USMLE Policies and Procedures Regarding the Validity of Passing Level Scores*, as staff and/or the CIR deem appropriate and without requiring staff and/or the CIR to conduct separate proceedings.
7. In the event of irregular behavior that the CIR deems, in its discretion, to be sufficiently serious to warrant such action, the CIR may bar the individual from future examinations and/or implement special procedures for administering future examinations to the affected individual. If an individual is barred from future examinations, the CIR may allow for testing after a specified minimum time, upon petition of a medical licensing authority.
8. A decision of the CIR may be appealed to the USMLE Composite Committee if the individual involved has a reasonable basis to believe the CIR did not act in compliance with applicable USMLE policies and/or procedures or that the CIR's decision was clearly contrary to the weight of the evidence before it. The appeal must be received within 30 days of the date on which the notice of the CIR's decision was mailed to the individual. If the score for the examinee and CIR findings are reported during the pendency of the appeal, the recipient of the report will be informed that the individual is appealing the decision. The Composite Committee will decide appeals based upon a written record, including all information available to the CIR, a transcript of the recording made during the individual's appearance before the CIR (if there was such an appearance and it was transcribed), and the basis for appeal set forth by the individual. Neither the individual who is the subject of a CIR decision nor anyone representing that individual shall be entitled to appear in person before the Composite Committee. If the Composite Committee determines that the CIR did not act in compliance with applicable USMLE policies and procedures and/or that the decision of the CIR was clearly contrary to the weight of the evidence, the Composite Committee may reverse the decision of the CIR or remand the matter to the CIR or staff for further consideration. If the Composite Committee reverses the decision of the CIR to annotate the individual's USMLE record, all entities that received USMLE transcripts or score reports showing irregular behavior will be notified of the decision of the Composite Committee and provided with an updated transcript and/or score report. Otherwise, the determination of the CIR will stand.

EXHIBIT C



UNITED STATES MEDICAL LICENSING EXAMINATION ®

STEP 3 SCORE REPORT

This score report is provided for the use of the examinee.

Third-party users of USMLE information are advised to rely solely on official USMLE transcripts.

Bowary, Paul

USMLE ID: 0-899-284-4

Test Date: April 8, 2018

The USMLE is a single examination program consisting of three Steps designed to assess an examinee's understanding of and ability to apply concepts and principles that are important in health and disease and that constitute the basis of safe and effective patient care. Step 3 is designed to assess whether an examinee can apply medical knowledge and understanding of biomedical and clinical science essential for the unsupervised practice of medicine, with emphasis on patient management in ambulatory settings. The examination consists of two days: Day 1, Foundations of Independent Practice (FIP), assesses an examinee's knowledge of basic medical and scientific principles essential for effective health care; Day 2, Advanced Clinical Medicine (ACM), assesses the examinee's ability to apply comprehensive knowledge of health and disease in the context of patient management and the evolving manifestation of disease over time. Results of the examination are reported to medical licensing authorities in the United States and its territories for use in granting an initial license to practice medicine. This score[§] represents your result for the administration of Step 3 that began on the test date shown above.

FAIL

This result is based on the minimum passing score recommended by USMLE for Step 3. Individual licensing authorities may accept the USMLE-recommended pass/fail result or may establish a different passing score for their own jurisdictions.

192

This score is determined by your overall performance on Step 3. For administrations between January 1, 2017 and December 31, 2017, the mean and standard deviation for first-time examinees from U.S. and Canadian medical schools were approximately 226 and 15, respectively, with most scores falling between 140 and 260. A score of 196 is recommended by USMLE to pass Step 3. The standard error of measurement (SEM)[‡] for this scale is approximately six points.

[§]Effective April 1, 2013, test results are reported on a three-digit scale only. Test results reported as passing represent an exam score of 75 or higher on a two-digit scoring scale.

[‡]Your score is influenced both by your general understanding of clinical medicine and by the specific set of items selected for this Step 3 examination. The Standard Error of Measurement (SEM) provides an index of the variation in scores that would be expected to occur if an examinee were tested repeatedly using different sets of items covering similar content.

INFORMATION PROVIDED FOR EXAMINEE USE ONLY

The Performance Profile below is provided solely for the benefit of the examinee. These profiles are developed as assessment tools for examinees only and will not be reported or verified to any third party.

USMLE STEP 3 PERFORMANCE PROFILE

	Lower Performance	Borderline Performance	Higher Performance
EXAMINATION DAY 1			
Foundations of Independent Practice	xxxxxxxxxx		
EXAMINATION DAY 2			
Advanced Clinical Medicine (MCQ)		xxxxxxxxxxxx	
Advanced Clinical Medicine (CCS)		xxxxxxxxxxxxxxxxxx	
PHYSICIAN TASK			
MK: Applying Foundational Science Concepts		xxxxxxxxxxxxxxxxxx	
PC: Diagnosis		xxxxxxxxxxxxxx	
PC: Health Maint & Disease Prevent/Pharmacotherapy		xxxxxxxxxxxxxxxxxx	
PC: Clinical Interventions/Mixed Mgmt		xxxxxxxxxxxxxxxxxx	
Systems-based Practice/Patient Safety & PBLI		xxxxxxxxxxxxxx	
SYSTEM			
Immune/Blood & Lymph/Endocrine/Multisystem		xxxxxxxxxxxxxxxxxx	
Bhv Health & Soc Sci: Comm Skills/Ethics/Pt Safety		xxxxxxxxxxxxxxxxxx	
Nervous System & Special Senses		xxxxxxxxxxxxxxxxxx	
Musculoskeletal Sys/Skin & Subcutaneous Tissue		xxxxxxxxxxxxxxxxxx	
Cardiovascular System		xxxxxxxxxxxxxxxxxx	
Respiratory System	*xxxxxxxxxxxxxx		
Gastrointestinal System		xxxxxxxxxxxxxxxxxx	
Renal/Urinary & Male/Female Sys & Pregnancy		xxxxxxxxxxxxxxxxxx	
Biostatistics & Epidemiology/Population Health		xxxxxxxxxxxxxx	
PATIENT AGE			
Pediatric (Birth–17 yrs)		xxxxxxxxxxxxxx	
Young Adult/Middle-aged Adult (18–54 yrs)		xxxxxxxxxxxxxx	
Older Adult (55–74 yrs)		xxxxxxxxxxxxxx	
Elderly (Older than 74 yrs)		xxxxxxxxxxxxxxxxxx	

The above Performance Profile is provided to aid in self-assessment. The shaded area defines a borderline level of performance for each content area; borderline performance is comparable to HIGH FAIL / LOW PASS on the total test.

Performance bands indicate areas of relative strength and weakness. Some bands are wider than others. The width of a performance band reflects the precision of measurement: narrower bands indicate greater precision. The band width for a given content area is the same for all examinees. An asterisk indicates that your performance band extends beyond the displayed portion of the scale. Small differences in the location of bands should not be over interpreted. If two bands overlap, the performance in the associated areas should be interpreted as similar.

Descriptions of the topics covered in these content areas, as well as other topics covered on USMLE Step 3, can be found in the informational materials for USMLE Step 3 on the USMLE website (<http://www.usmle.org/step-3/#outlines>). With the exception of the Day 2 Advanced Clinical Medicine CCS profile, all profiles are based upon performance in the MCQ sections.

CCS—Computer-based Case Simulation; MCQ—Multiple-choice Question; MK—Medical Knowledge; PC—Patient Care; PBLI—Practice-based Learning and Improvement.

EXHIBIT D

Sharon Ray

From: USMLE Inbox
Sent: Thursday, August 15, 2019 10:42 AM
To: 'Paul Bowary'
Subject: RE: FW: urgent: Step 3 application cancellation + fee reimbursement request 08992844

Dear Dr. Bowary,

We have processed a partial refund in the amount of \$775 for your Step 3 application. You should see the credit to card within 7-10 business days.

Sincerely,

Assessment Services

Federation of State Medical Boards
400 Fuller Wiser Road | Euless, TX 76039
817-868-4041 direct | 817-868-4098 fax
usmle@fsmb.org | www.fsmb.org



Follow USMLE on social media!   

From: Paul Bowary <paulbowary@yahoo.com>
Sent: Wednesday, August 14, 2019 12:27 PM
To: USMLE Inbox <usmleinbox@fsmb.org>
Subject: Re: FW: urgent: Step 3 application cancellation + fee reimbursement request 08992844

Thank you so much for reviewing my request and granting this refund.

I reviewed my bank statements and I realized that the card I used is my active Chime Banking Visa Card ending with

REDACTED

You can process the refund to go back on that card. Please let me know if you have any questions or concerns about that.

Thank you so much again!

Best,
Paul Bowary

Paul Bowary, M.D.
PGY-IV Psychiatry Resident
CfNN Research Trainee, Providence VAMC

APA New England/Eastern Canada RFM Rep
Butler Hospital/ Brown University, DPHB
345 Blackstone Boulevard, Providence, RI 02906
(VM) 401-455-6200 x26133 l (Pgr) 401-452-0744



On Aug 14, 2019, 1:21 PM -0400, USMLE Inbox <usmleinbox@fsmb.org>, wrote:

Dear Dr. Bowary,

A partial refund of \$ 775.00 has been granted. Please provide a current mailing address for check to be issued and mailed to you.

Sincerely,

Assessment Services

Federation of State Medical Boards

400 Fuller Wiser Road | Suite 300 | Euless, TX 76039

817-868-4041 | 817-868-4098 fax

usmle@fsmb.org | www.fsmb.org

<>

Follow USMLE on social media! <><><>

From: Paul Bowary <paulbowary@yahoo.com>

Sent: Friday, August 9, 2019 3:38 PM

To: USMLE Inbox <usmleinbox@fsmb.org>

Subject: Fw: urgent: Step 3 application cancellation + fee reimbursement request

To whom it may concern,

My name is Paul Bowary. USMLE ID: 08992844.

I was advised to reach out to you again with documentation regarding my request for refund of my last Step 3 application that I have not ended up using.

I had difficult personal circumstances that were behind my multiple usmle step 3 test date changes. However, the reason this was not done during the extended eligibility period is a visa related matter.

I am attaching copy of the letter received from ECFMG stating that my training would get interrupted if I do not submit a valid passport copy in a timely fashion. That was one of the multiple emails we received from ecfmg in June which urged me to drop any other responsibilities and work on my passport situation; otherwise ECFMG would not sponsor my J1 visa (now all resolved).

My passport had expired while I was here in the US as I found out I was supposedly unable to renew it without going back to my home country. I had to travel multiple times to the Lebanese consulate in NY in order to apply for an exceptional one year extension while I signed an affidavit that I will be getting a new passport within 2 months (traveling to Beirut tomorrow).

I am also attaching copy of my passport with the renewal page as well as the signed affidavit for you to get a sense of the timeline.

This past year has been very difficult for me [REDACTED] emotionally and financially. I would be very appreciative if you can help me protect my confidentiality around these problems as well as consider reimbursing me for my last application fee. I am thankful in advance for your understanding. Your office had been empathetic and helpful to me in the past; I hope that I can ask for this last bit of extra support.

If this is approved,

You can use the following information for direct deposit to the following account:

Routing: [REDACTED]

Account#: [REDACTED]

If a debit card information is needed please let me know and I can provide that (I am not sure which card I used back when I registered and I changed banks twice this past year)

Thank you so much for your understanding!

Best regards,

Paul Bowary

----- Forwarded Message -----

From: USMLE Inbox <usmleinbox@fsmb.org>

To: Paul Bowary <paulbowary@yahoo.com>

Sent: Thursday, August 1, 2019, 11:22:07 AM EDT

Subject: RE: urgent: Step 3 application cancellation + fee reimbursement request

Dear Dr. Bowary,

I am sorry that you were not able to complete your Step 3 exam within your eligibility period. The USMLE Bulletin of Information states the following:

"If you do not take the test within your original or extended eligibility period and wish to take it in the future, you must reapply by submitting a new application and fee(s). The USMLE Step 3 fee is non-refundable and non-transferable from one eligibility period to another or from one application to another."

There are a few circumstances when a partial refund can be made, such as medical emergencies, death of an immediate family member (spouse, father, mother, child) and VISA issues. All of these circumstances require documentation to be provided. Requests in these types of circumstances should be emailed to usmle@fsmb.org

Please include your name, USMLE number and email address in the letter along with a confirmation of your cancelation with Prometric. Once the letter and documentation are received the committee will review your case. You will receive an email notification once a decision has been made. The refund process takes approximately 2 - 4 weeks.

If you do not meet one of the circumstances listed above you will be required to submit a new application and fees.

Sincerely,

Assessment Services

Federation of State Medical Boards

400 Fuller Wiser Road | Suite 300 | Euless, TX 76039

817-868-4041 | 817-868-4098 fax

usmle@fsmb.org | www.fsmb.org

<>

Follow USMLE on social media! <><><>

From: Paul Bowary <paulbowary@yahoo.com>
Sent: Wednesday, July 31, 2019 1:08 PM
To: USMLE Inbox <usmleinbox@fsmb.org>
Subject: urgent: Step 3 application cancellation + fee reimbursement request

Good afternoon,

My application will expire today (including eligibility extension). I am writing to **CANCEL** my current application and kindly request **REIMBURSEMENT**. This is not the first time this happens as I have been struggling with personal issues that caused multiple delays.

I have other application and licensing costs coming ahead and I would truly appreciate reimbursement for all or part of the application fee, as I have not really used it.

If this is approved,

you can either issue me a check to:

20 Mission Place, Providence, RI 02908

or by direct deposit to the following account:

Routing: REDACTED

Account#: REDACTED

If you need a debit card instead, please connect to me by email or cell: 401-465-1179

Because I am not sure the card you have on file is a card I am still using.

My USMLE ID is: 08992844

Thank you so much in advance for your understanding and for taking the above into consideration.

Sincerely,

Paul Bowary

EXHIBIT E

From: Rachael Gillespie <rgillespie@nbme.org>
Sent: Thursday, March 5, 2020 2:12 PM
To: USMLESec
Subject: IMPORTANT - Please Review - 08992844 [ref:_00D46pfBg_5004A1oJ2Zx:ref]
Attachments: IMG_7508.jpg; IMG_7509.jpg; IMG_7511.jpg; IMG_7512.jpg; IMG_7513.jpg

Categories: Katie, Nicole

Dear USMLE Sec:

Please review this examinee's allegation and attachments.

Sincerely,
Rachael

----- Original Message -----

From: Bowary, Paul [paul_bowary@brown.edu]
Sent: 3/5/2020 1:57 PM
To: webmail@nbme.org
Subject: Fwd: Step 3 Score Report

To whom it may concern,

Please see below in re. to an urgent Step 3 Score Report matter. FSMB said they will contact NBME for clarification. If I were aware that this issue was not resolved since last year, I would have initiated this communication earlier. This caught me by surprise now, while submitting my full medical license application. I tried calling NBME but was informed that last year I was considered not certified yet and that's why NBME helped but now that my step 3 score is released, the person from NBME examinee support services was not able to help. Please guide me through this process as soon as possible as this is jeopardizing my license application and indirectly my professional future.

Thank You!
Paul Bowary

----- Forwarded message -----

From: **Bowary, Paul** <paul_bowary@brown.edu>
Date: Thu, Mar 5, 2020 at 1:23 PM
Subject: Step 3 Score Report
To: <usmle@fsmb.org>

To whom it may concern,

I am a 4th year Psychiatry resident at Brown. I was in contact with NBME's Examinee Support Services last summer in re. to my Step 3 rescoring. They were very helpful at that time and assisted me in submitting that request directly via their secretariat office. I was eventually informed that I passed and received the score report I am attaching along with a copy of an email from NBME explaining the process. I never checked in with FSMB after that as what I understood from the email was that the process will be automatic. I was able to get refunded though for the attempt that I understood was voided or for the application that I eventually did not need as I received my updated score (please see attached).

I am in the middle of my full medical license application, and while the RI medical board have my updated score report, they need you guys to contact them and verify it. It seems FCVS sent them documentation of me failing two step 3 attempts. FCVS say they only access FSMB records.

I tried to contact NBME myself, the person who spoke to me stated that I should be contacting FSMB for this. She could not see any records as she believes the records she has access to are not inclusive to all the records the Secretariat has which can be confidential. Could you please clarify this issue? This process has been emotionally exhausting since last year and I was not expecting I will have to go through it again during licensing.

I am sending everything as screenshots for more accuracy but also to avoid forwarding any email that NBME had urged me not to forward. I saved these copies for my program directors as advised by NBME in July.

Thank you in advance for your assistance and help!
Looking forward to hearing from you.

Thank you
Paul Bowary

--

Paul Bowary, M.D.

PGY-IV Psychiatry Resident
APA New England/Eastern Canada RFM Rep
Butler Hospital/ Brown University, DPHB
(VM) 401-455-6200 x26133

[Inline image URL :

[https://docs.google.com/uc?export=download&id=1JS4Hhe1mdLiCxpp1rQugj4XrBTBMAm6S&revid=0ByAKfBUaTQx4M2M4aGpUVXR3cHUyOUpnUmQyZ1NiNG51NWhBPQ\]](https://docs.google.com/uc?export=download&id=1JS4Hhe1mdLiCxpp1rQugj4XrBTBMAm6S&revid=0ByAKfBUaTQx4M2M4aGpUVXR3cHUyOUpnUmQyZ1NiNG51NWhBPQ)

--

Paul Bowary, M.D.

PGY-IV Psychiatry Resident
APA New England/Eastern Canada RFM Rep
Butler Hospital/ Brown University, DPHB
(VM) 401-455-6200 x26133

[Inline image URL :

[https://docs.google.com/uc?export=download&id=1JS4Hhe1mdLiCxpp1rQugj4XrBTBMAm6S&revid=0ByAKfBUaTQx4M2M4aGpUVXR3cHUyOUpnUmQyZ1NiNG51NWhBPQ\]](https://docs.google.com/uc?export=download&id=1JS4Hhe1mdLiCxpp1rQugj4XrBTBMAm6S&revid=0ByAKfBUaTQx4M2M4aGpUVXR3cHUyOUpnUmQyZ1NiNG51NWhBPQ)

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ref:_00D46pfBg._5004A1oJ2Zx:ref



USMLE Step 3 Report.pdf



UNITED STATES MEDICAL LICENSING EXAMINATION *

STEP 3 SCORE REPORT

This score report is provided for the use of the examinee.

Third-party users of USMLE information are advised to rely solely on official USMLE transcripts.

Bowary, Paul**USMLE ID: 0-899-284-4****Test Date: April 8, 2018**

The USMLE is a single examination program consisting of three Steps designed to assess an examinee's understanding of and ability to apply concepts and principles that are important in health and disease and that constitute the basis of safe and effective patient care. Step 3 is designed to assess whether an examinee can apply medical knowledge and understanding of biomedical and clinical science essential for the unsupervised practice of medicine, with emphasis on patient management in ambulatory settings. The examination consists of two days: Day 1, Foundations of Independent Practice (FIP), assesses an examinee's knowledge of basic medical and scientific principles essential for effective health care; Day 2, Advanced Clinical Medicine (ACM), assesses the examinee's ability to apply comprehensive knowledge of health and disease in the context of patient management and the evolving manifestation of disease over time. Results of the examination are reported to medical licensing authorities in the United States and its territories for use in granting an initial license to practice medicine. This score¹ represents your result for the administration of Step 3 that began on the test date shown above.

PASS

This result is based on the minimum passing score recommended by USMLE for Step 3. Individual licensing authorities may accept the USMLE-recommended pass/fail result or may establish a different passing score for their own jurisdictions.

199

This score is determined by your overall performance on Step 3. For administrations between January 1, 2017 and December 31, 2017, the mean and standard deviation for first-time examinees from U.S. and Canadian medical schools were approximately 226 and 15, respectively, with most scores falling between 140 and 260. A score of 196 is recommended by USMLE to pass Step 3. The standard error of measurement (SEM)² for this scale is approximately six points.

¹Effective April 1, 2013, test results are reported on a three-digit scale only. Test results reported as passing represent an exam score of 75 or higher on a two-digit scoring scale.

²Your score is influenced both by your general understanding of clinical medicine and by the specific set of items selected for this Step 3 examination. The Standard Error of Measurement (SEM) provides an index of the variation in scores that would be expected to occur if an examinee were tested repeatedly using different sets of items covering similar content.

INFORMATION PROVIDED FOR EXAMINEE USE ONLY

The Performance Profile below is provided solely for the benefit of the examinee.

These profiles are developed as assessment tools for examinees only and will not be reported or verified to any third party.

USMLE STEP 3 PERFORMANCE PROFILE

	Lower Performance	Borderline Performance	Higher Performance
EXAMINATION DAY 1			
Foundations of Independent Practice	XXXXXXXXXX		
EXAMINATION DAY 2			
Advanced Clinical Medicine (MCQ)	XXXXXXXXXXXX		
Advanced Clinical Medicine (CCS)	XXXXXXXXXXXXXX		
PHYSICIAN TASK			
MK: Applying Foundational Science Concepts	XXXXXXXXXXXXXX		
PC: Diagnosis	XXXXXXXXXXXX		
PC: Health Maint & Disease Prevent/Pharmacotherapy	XXXXXXXXXXXXXX		
PC: Clinical Interventions/Mixed Mgmt	XXXXXXXXXXXXXX		
Systems-based Practice/Patient Safety & PBLI	XXXXXXXXXXXX		
SYSTEM			
Immune/Blood & Lymph/Endocrine/Multisystem	XXXXXXXXXXXXXX		
Bhiv Health & Soc Sci: Comm Skills/Ethics/Pt Safety	XXXXXXXXXXXXXX		
Nervous System & Special Senses	XXXXXXXXXXXXXX		
Musculoskeletal Sys/Skin & Subcutaneous Tissue	XXXXXXXXXXXXXX		
Cardiovascular System	XXXXXXXXXXXXXX		
Respiratory System	*XXXXXXXXXXXX		
Gastrointestinal System	XXXXXXXXXXXXXX		
Renal/Urinary & Male/Female Sys & Pregnancy	XXXXXXXXXXXXXX		
Biostatistics & Epidemiology/Population Health	XXXXXXXXXXXX		

The USMLE is a single examination program consisting of three Steps designed to assess an examinee's knowledge of and ability to perform the tasks of a physician. Step 1 is designed to assess whether an examinee can apply medical knowledge and understanding of biomedical and clinical science essential for the unsupervised practice of medicine, with emphasis on patient management in ambulatory settings. The examination consists of two days: Day 1, Foundations of Independent Practice (FIP), assesses an examinee's knowledge of basic medical and scientific principles essential for effective health care; Day 2, Advanced Clinical Medicine (ACM), assesses the examinee's ability to apply comprehensive knowledge of health and disease in the context of patient management and the evolving manifestation of disease over time. Results of the examination are reported to medical licensing authorities in the United States and its territories for use in granting an initial license to practice medicine. This score¹ represents your result for the administration of Step 3 that began on the test date shown above.

PASS

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199

This score is determined by your overall performance on Step 3. For administrations between January 1, 2017 and December 31, 2017, the mean and standard deviation for first-time examinees from U.S. and Canadian medical schools were approximately 226 and 15, respectively, with most scores falling between 140 and 260. A score of 196 is recommended by USMLE to pass Step 3. The standard error of measurement (SEM)² for this scale is approximately six points.

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²Your score is influenced both by your general understanding of clinical medicine and by the specific set of items selected for this Step 3 examination. The Standard Error of Measurement (SEM) provides an index of the variation in scores that would be expected to occur if an examinee were tested repeatedly using different sets of items covering similar content.

INFORMATION PROVIDED FOR EXAMINEE USE ONLY

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USMLE STEP 3 PERFORMANCE PROFILE

	Lower Performance	Borderline Performance	Higher Performance
EXAMINATION DAY 1			
Foundations of Independent Practice	XXXXXXXXXX		
EXAMINATION DAY 2			
Advanced Clinical Medicine (MCQ)	XXXXXXXXXXXXXX		
Advanced Clinical Medicine (CCS)	XXXXXXXXXXXXXXXXXX		
PHYSICIAN TASK			
MK: Applying Foundational Science Concepts	XXXXXXXXXXXXXX		
PC: Diagnosis	XXXXXXXXXXXXXX		
PC: Health Maint & Disease Prevent/Pharmacotherapy	XXXXXXXXXXXXXX		
PC: Clinical Interventions/Mixed Mgmt	XXXXXXXXXXXXXX		
Systems-based Practice/Patient Safety & PBLI	XXXXXXXXXXXXXX		
SYSTEM			
Immune/Blood & Lymph/Endocrine/Multisystem	XXXXXXXXXXXXXX		
Bhv Health & Soc Sci: Comm Skills/Ethics/Pt Safety	XXXXXXXXXXXXXX		
Nervous System & Special Senses	XXXXXXXXXXXXXX		
Musculoskeletal Sys/Skin & Subcutaneous Tissue	XXXXXXXXXXXXXX		
Cardiovascular System	XXXXXXXXXXXXXX		
Respiratory System	*XXXXXXXXXXXXXX		
Gastrointestinal System	XXXXXXXXXXXXXX		
Renal/Urinary & Male/Female Sys & Pregnancy	XXXXXXXXXXXXXX		
Biostatistics & Epidemiology/Population Health	XXXXXXXXXXXXXX		
PATIENT AGE			
Pediatric (Birth–17 yrs)	XXXXXXXXXXXXXX		
Young Adult/Middle-aged Adult (18–54 yrs)	XXXXXXXXXXXXXX		
Older Adult (55–74 yrs)	XXXXXXXXXXXXXX		
Elderly (Older than 74 yrs)	XXXXXXXXXXXXXX		

The above Performance Profile is provided to aid in self-assessment. The shaded area defines a borderline level of performance for each content area; borderline performance is comparable to HIGH FAIL / LOW PASS on the total test.

Performance bands indicate areas of relative strength and weakness. Some bands are wider than others. The width of a performance band reflects the precision of measurement: narrower bands indicate greater precision. The band width for a given content area is the same for all examinees. An asterisk indicates that your performance band extends beyond the displayed portion of the scale. Small differences in the location of bands should not be over interpreted. If two bands overlap, the performance in the associated areas should be interpreted as similar.

Descriptions of the topics covered in these content areas, as well as other topics covered on USMLE Step 3, can be found in the informational materials for USMLE Step 3 on the USMLE website (<http://www.usmle.org/step-3/outlines>). With the exception of the Day 2 Advanced Clinical Medicine CCS profile, all profiles are based upon performance in the MCQ sections.

CCS—Computer-based Case Simulation; MCQ—Multiple-choice Question; MK—Medical Knowledge; PC—Patient Care; PBLI—Practice-based Learning and Improvement.



Payment Summary

Customer: Paul Bowary

Transaction Date: 08/15/2019

Payment For: RTN (Refund)

Invoice #: RTN0026602

Total: \$775.00

Balance: \$0.00

Total Quantity	Item Description	Unit Price	Extended Price
1	USMLE Admin Fee	((\$100.00))	((\$100.00))
1	STEP 3 EXAM FEE	(\$875.00)	(\$875.00)

From: Nbme <webmail@nbme.org>
 Date: Mon, Jul 8, 2019 at 4:26 PM
 Subject: Re: USMLE Step 3 Score Report
 To: Paul Bowary <paul_bowary@brown.edu>

Dear Dr Bowary,

Please be advised that our communication, including this email, is as confidential as your NBME examination content. The NBME reserves the right to discontinue examination services to an individual or an institution at any time in order to maintain the security and integrity of NBME's examination programs. However, given the nature and timeline of this issue in your case, it is necessary for you to communicate this information with your program directors. I would recommend that you do not forward this email to your directors and rather relay the message to them in person and advise them to contact NBME with any questions or concerns.

Dr Bowary, I apologize for the delay. I appreciate your patience throughout this whole process. Thank you for sharing all the delicate information and important documentation that NBME requested. I also appreciate your very detailed email that explained your challenges on your examination day and the negative impact this issue has had on your training.

After thoroughly investigating this case and reviewing all the dates of certain reports and of your requests, it became clearer that the confusion around your USMLE score reports may have potentially stemmed from miscommunication. Your USMLE Step 3 score report was not primarily delayed due to ECFMG-related matter. The delay was the direct result of the following situation: you were authorized to take this test again, while your first attempt had a score recheck inquiry attached to it. Unfortunately, the score recheck requests take months to be processed when not submitted through FSMB directly (you had initiated this inquiry through NBME).

Your updated Step 3 score was available, shortly after your second attempt date, reflecting a PASS classification. This score report could not be released as you had another active Step 3 application on file. There were multiple failed attempts to contact you by phone in January, February and March 2019. Your phone number listed in our system is (401) 465- 1179. Currently, I am sharing with you your reanalyzed USMLE Step 3 test results of your first attempt (test date: April 8, 2018). Once you approve the attached score report, any Step 3 attempts made after the test date on the report will be considered void and removed from NBME's and FSMB's system. You will be refunded for the voided attempt.

Please accept my apologies for any gaps in your communication with NBME since the start of this process. It took me a full week of investigation to figure out what has been going on. I can only imagine how stressful this has been for you. I hope this email helped answer all your questions. Given the sensitivity of this issue, we avoid discussing these details with any parties other than yourself. However, if your program directors have any further questions or concerns, please contact NBME to schedule a conference call that you will be required to attend.

If we do not hear back from you in the upcoming 48 hours in regards to your approval of the attached USMLE score report, we will consider this score report (with a PASS classification), as your official score report and will route it along with a report of our communication with you to FSMB.

Thank you.

Yours faithfully,

NBME
 Examinee Support Services
 3750 Market Street
 Philadelphia, PA 19104-3102
 Telephone: (215) 590-9700
 Fax: (215) 590-9460
 E-mail: webmail@nbme.org
 Website: <http://www.nbme.org>

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Dear Dr Bowary,

Please be advised that our communication, including this email, may contain confidential information critical to the NBME. The NBME reserves the right to disseminate this information at any time in order to maintain the security and integrity of NBME's examination programs through its website and members of the public at large. It is necessary for you to communicate this

information with your program directors. I would recommend that you do not forward this email to your directors and rather relay the message to them in person and advise them to contact NBME with any questions or concerns.

Dr Bowary, I apologize for the delay. I appreciate your patience throughout this whole process. Thank you for sharing all the delicate information and important documentation that NBME requested. I also appreciate your very detailed email that explained your challenges on your examination day and the negative impact this issue has had on your training.

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Your updated Step 3 score was available, shortly after your second attempt date, reflecting a PASS classification. This score report could not be released as you had another active Step 3 application on file. There were multiple failed attempts to contact you by phone in January, February and March 2019. Your phone number listed in our system is (401) 465-1179. Currently, I am sharing with you your reanalyzed USMLE Step 3 test results of your first attempt (test date: April 8, 2018). Once you approve the attached score report, any Step 3 attempts made after the test date on the report will be considered void and removed from NBME's and FSMB's system. You will be refunded for the voided attempt.

Please accept my apologies for any gaps in your communication with NBME since the start of this process. It took me a full week of investigation to figure out what has been going on. I can only imagine how stressful this has been for you. I hope this email helped answer all your questions. Given the sensitivity of this issue, we avoid discussing these details with any parties other than yourself. However, if your program directors have any further questions or concerns, please contact NBME to schedule a conference call that you will be required to attend.

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Thank you.

Yours faithfully,

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Telephone: (215) 590-9700
Fax: (215) 590-9460
E-mail: webmail@nbme.org
Website: <http://www.nbme.org>

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USMLE Step 3
Report.pdf



PDF

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EXHIBIT F

From: Bernard, Alexandra (RIDOH-Contractor) <Alexandra.Bernard.CTR@health.ri.gov>
Sent: Thursday, April 16, 2020 3:13 PM
To: USMLESec
Subject: FW: [EXTERNAL] : Re: RI MEDICAL BOARD
Attachments: IMG_7512.jpg; IMG_7513.jpg; IMG_7511.jpg; IMG_7510.jpg; IMG_7508.jpg; IMG_7509.jpg
Categories: Nicole

From: Paul Bowary <paul_bowary@brown.edu>
Sent: Thursday, March 5, 2020 8:26 AM
To: Bernard, Alexandra (RIDOH-Contractor) <Alexandra.Bernard.CTR@health.ri.gov>
Subject: [EXTERNAL] : Re: RI MEDICAL BOARD

Hi Alexandra,

Please find attached copies of my step 3 score report, nbme's explanation, payment transaction report showing that fsmb refunded me for the second attempt after nbme updated the score of my first attempt.

Two last important points. Please make sure the nbme email copy is kept confidential as I was required to only share this with my program directors. Also, please let me know if I need to submit another check as my bank cancels checks that are not cashed within a certain period of time.

Thanks again for your help!

Best,
Paul Bowary

 [Paul Bowary \[spikenow.com\]](#) 

PGY-IV Psychiatry Resident
CfNN Research Trainee, Providence VAMC
APA New England/Eastern Canada RFM Rep
Butler Hospital/ Brown University, DPHB
345 Blackstone Boulevard, Providence, RI 02906
(VM) 401-455-6200 x26133 I (Pgr) 401-452-0744



On March 4, 2020 at 20:15 GMT, Bernard Alexandra RIDOH Contractor <alexandra.bernard.ctr@health.ri.gov> wrote:

Dr. Bowary,

Please give me call at your earliest convenience.

Ask to speak with me.

401-222-2828

Alexandra Bernard

Boards and Licensing

Licensing Aide II

Rhode Island Department of Health

Three Capitol Hill, Suite 104

Providence, RI 02908

Direct: 401.222.2828 Fax: 401.222.1272

This is an external email. Do not click on links or open attachments unless you trust the sender.



USMLE Step 3 Report.pdf



UNITED STATES MEDICAL LICENSING EXAMINATION *

STEP 3 SCORE REPORT

This score report is provided for the use of the examinee.

Third-party users of USMLE information are advised to rely solely on official USMLE transcripts.

Bowary, Paul**USMLE ID: 0-899-284-4****Test Date: April 8, 2018**

The USMLE is a single examination program consisting of three Steps designed to assess an examinee's understanding of and ability to apply concepts and principles that are important in health and disease and that constitute the basis of safe and effective patient care. Step 3 is designed to assess whether an examinee can apply medical knowledge and understanding of biomedical and clinical science essential for the unsupervised practice of medicine, with emphasis on patient management in ambulatory settings. The examination consists of two days: Day 1, Foundations of Independent Practice (FIP), assesses an examinee's knowledge of basic medical and scientific principles essential for effective health care; Day 2, Advanced Clinical Medicine (ACM), assesses the examinee's ability to apply comprehensive knowledge of health and disease in the context of patient management and the evolving manifestation of disease over time. Results of the examination are reported to medical licensing authorities in the United States and its territories for use in granting an initial license to practice medicine. This score¹ represents your result for the administration of Step 3 that began on the test date shown above.

PASS

This result is based on the minimum passing score recommended by USMLE for Step 3. Individual licensing authorities may accept the USMLE-recommended pass/fail result or may establish a different passing score for their own jurisdictions.

199

This score is determined by your overall performance on Step 3. For administrations between January 1, 2017 and December 31, 2017, the mean and standard deviation for first-time examinees from U.S. and Canadian medical schools were approximately 226 and 15, respectively, with most scores falling between 140 and 260. A score of 196 is recommended by USMLE to pass Step 3. The standard error of measurement (SEM)² for this scale is approximately six points.

¹Effective April 1, 2013, test results are reported on a three-digit scale only. Test results reported as passing represent an exam score of 75 or higher on a two-digit scoring scale.

²Your score is influenced both by your general understanding of clinical medicine and by the specific set of items selected for this Step 3 examination. The Standard Error of Measurement (SEM) provides an index of the variation in scores that would be expected to occur if an examinee were tested repeatedly using different sets of items covering similar content.

INFORMATION PROVIDED FOR EXAMINEE USE ONLY

The Performance Profile below is provided solely for the benefit of the examinee.

These profiles are developed as assessment tools for examinees only and will not be reported or verified to any third party.

USMLE STEP 3 PERFORMANCE PROFILE

	Lower Performance	Borderline Performance	Higher Performance
EXAMINATION DAY 1			
Foundations of Independent Practice	XXXXXXXXXX		
EXAMINATION DAY 2			
Advanced Clinical Medicine (MCQ)	XXXXXXXXXXXXXX		
Advanced Clinical Medicine (CCS)	XXXXXXXXXXXXXXXXXX		
PHYSICIAN TASK			
MK: Applying Foundational Science Concepts	XXXXXXXXXXXXXX		
PC: Diagnosis	XXXXXXXXXXXXXX		
PC: Health Maint & Disease Prevent/Pharmacotherapy	XXXXXXXXXXXXXX		
PC: Clinical Interventions/Mixed Mgmt	XXXXXXXXXXXXXX		
Systems-based Practice/Patient Safety & PBLI	XXXXXXXXXXXXXX		
SYSTEM			
Immune/Blood & Lymph/Endocrine/Multisystem	XXXXXXXXXXXXXX		
Bhiv Health & Soc Sci: Comm Skills/Ethics/Pt Safety	XXXXXXXXXXXXXX		
Nervous System & Special Senses	XXXXXXXXXXXXXX		
Musculoskeletal Sys/Skin & Subcutaneous Tissue	XXXXXXXXXXXXXX		
Cardiovascular System	XXXXXXXXXXXXXX		
Respiratory System	*XXXXXXXXXXXXXX		
Gastrointestinal System	XXXXXXXXXXXXXX		
Renal/Urinary & Male/Female Sys & Pregnancy	XXXXXXXXXXXXXX		
Biostatistics & Epidemiology/Population Health	XXXXXXXXXXXXXX		

The USMLE is a single examination program consisting of three Steps designed to assess an examinee's knowledge of and ability to perform the tasks of a physician. Step 1 is designed to assess whether an examinee can apply medical knowledge and understanding of biomedical and clinical science essential for the unsupervised practice of medicine, with emphasis on patient management in ambulatory settings. The examination consists of two days: Day 1, Foundations of Independent Practice (FIP), assesses an examinee's knowledge of basic medical and scientific principles essential for effective health care; Day 2, Advanced Clinical Medicine (ACM), assesses the examinee's ability to apply comprehensive knowledge of health and disease in the context of patient management and the evolving manifestation of disease over time. Results of the examination are reported to medical licensing authorities in the United States and its territories for use in granting an initial license to practice medicine. This score¹ represents your result for the administration of Step 3 that began on the test date shown above.

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PC: Health Maint & Disease Prevent/Pharmacotherapy	XXXXXXXXXXXXXX		
PC: Clinical Interventions/Mixed Mgmt	XXXXXXXXXXXXXXXXXX		
Systems-based Practice/Patient Safety & PBLI	XXXXXXXXXXXXXX		
SYSTEM			
Immune/Blood & Lymph/Endocrine/Multisystem	XXXXXXXXXXXXXX		
Bhv Health & Soc Sci: Comm Skills/Ethics/Pt Safety	XXXXXXXXXXXXXXXXXX		
Nervous System & Special Senses	XXXXXXXXXXXXXXXXXX		
Musculoskeletal Sys/Skin & Subcutaneous Tissue	XXXXXXXXXXXXXX		
Cardiovascular System	XXXXXXXXXXXXXX		
Respiratory System	*XXXXXXXXXXXXXX		
Gastrointestinal System	XXXXXXXXXXXXXXXXXX		
Renal/Urinary & Male/Female Sys & Pregnancy	XXXXXXXXXXXXXXXXXX		
Biostatistics & Epidemiology/Population Health	XXXXXXXXXXXXXX		
PATIENT AGE			
Pediatric (Birth–17 yrs)	XXXXXXXXXXXXXX		
Young Adult/Middle-aged Adult (18–54 yrs)	XXXXXXXXXXXXXX		
Older Adult (55–74 yrs)	XXXXXXXXXXXXXX		
Elderly (Older than 74 yrs)	XXXXXXXXXXXXXX		

The above Performance Profile is provided to aid in self-assessment. The shaded area defines a borderline level of performance for each content area; borderline performance is comparable to HIGH FAIL / LOW PASS on the total test.

Performance bands indicate areas of relative strength and weakness. Some bands are wider than others. The width of a performance band reflects the precision of measurement: narrower bands indicate greater precision. The band width for a given content area is the same for all examinees. An asterisk indicates that your performance band extends beyond the displayed portion of the scale. Small differences in the location of bands should not be over interpreted. If two bands overlap, the performance in the associated areas should be interpreted as similar.

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CCS—Computer-based Case Simulation; MCQ—Multiple-choice Question; MK—Medical Knowledge; PC—Patient Care; PBLI—Practice-based Learning and Improvement.



Physician Services

Welcome, **Paul Bowary** ▼

Home Payments Transactions Account

Payments Due

No items available

Payment History

Last 12 Months ▼

Date	Payment For	Total	
01/23/2020	Uniform Application	\$60.00	Receipt
12/12/2019	FCVS	\$640.00	Receipt
08/15/2019	USMLE (Refund)	(\$775.00)	Receipt
04/22/2019	USMLE	\$70.00	Receipt

[Contact Us](#)

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*Version 7.2.0.19130



Payment Summary

Customer: Paul Bowary

Transaction Date: 08/15/2019

Payment For: RTN (Refund)

Invoice #: RTN0026602

Total: \$775.00

Balance: \$0.00

Total Quantity	Item Description	Unit Price	Extended Price
1	USMLE Admin Fee	((\$100.00))	((\$100.00))
1	STEP 3 EXAM FEE	(\$875.00)	(\$875.00)

From: Nbme <webmail@nbme.org>
Date: Mon, Jul 8, 2019 at 4:26 PM
Subject: Re: USMLE Step 3 Score Report
To: Paul Bowary <paul_bowary@brown.edu>

Dear Dr Bowary,

Please be advised that our communication, including this email, is as confidential as your NBME examination content. The NBME reserves the right to discontinue examination services to an individual or an institution at any time in order to maintain the security and integrity of NBME's examination programs. However, given the nature and timeline of this issue in your case, it is necessary for you to communicate this information with your program directors. I would recommend that you do not forward this email to your directors and rather relay the message to them in person and advise them to contact NBME with any questions or concerns.

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Thank you.

Yours faithfully,

NBME
Examinee Support Services
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Telephone: (215) 590-9700
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USMLE Step 3
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EXHIBIT G

From: [USMLESec](#)
To: [Bowary, Paul](#)
Bcc: [Amber Montanano](#); [Katie DiMartino](#); [Rachael Gillespie](#); [Dcusson@fsmb.org](#); [fcain@fsmb.org](#); [Sharon Ray](#); [MECCSupport](#); [USMLESecArchive](#)
Subject: Referral to USMLE Committee for Individualized Review – August 18-19, 2020: Paul Bowary, USMLE ID 08992844
Date: Monday, April 27, 2020 11:49:00 AM
Attachments: [USMLE Policies and Procedures re Irregular Behavior.pdf](#)
[Pol and Proc re Validity.pdf](#)
[Bowary IB.PDF](#)
[image002.png](#)

Dear Dr. Bowary:

Please review the attached documents and respond by the requested deadlines. If you would like to receive a hard copy of this correspondence, please confirm your address.

If you have any questions or concerns, please feel free to contact my office at USMLESec@nbme.org.

Sincerely,

Nicole Miller

Program Manager

Office of the USMLE Secretariat

T +1 215-495-6136

E USMLESec@nbme.org

W nbme.org



3750 Market Street, Philadelphia PA 19104, USA



Via Email
Personal and Confidential

April 27, 2020

Secretariat:
3750 Market Street
Philadelphia, PA 19104
(215) 590-9500
USMLESec@nbme.org
www.usmle.org

Paul Bowary
20 Mission Place
Providence, RI 02908

USMLE ID#: 0-899-284-4

Email: paul_bowary@brown.edu

Dear Dr. Bowary:

Examinees are advised in the USMLE *Bulletin of Information* that irregular behavior includes any action by applicants, examinees, potential applicants, or others that could compromise the validity, integrity, or security of the USMLE examination process. Among the examples of irregular behavior is altering or misrepresenting examination scores.

On the USMLE applications you submitted, you certified and acknowledged that you had read the USMLE *Bulletin of Information*, including information pertaining to the policies and procedures regarding Irregular Behavior and Score Validity, and agreed to abide by the policies and procedures therein.

Evidence is available, as outlined below, that you may have engaged in irregular behavior by altering your Step 3 score report and presenting it to the Federation of State Medical Boards ("FSMB"), NBME, and the Rhode Island Department of Health ("RIDOH") as authentic. Specifically:

- On March 5, 2020, you sent an email to FSMB inquiring about your USMLE Step 3 score, in relation to your application for a medical license in Rhode Island. You stated that you were informed via email from "webmail@nbme.org" in July 2019 that NBME had rechecked your Step 3 score and that you had passed your April 8, 2018 administration, which was previously reported as a fail. You attached a score report to the email, bearing your name and USMLE identification number, a Step 3 exam date of April 8, 2018, and a passing score of 199.
- In your email to FSMB, you attached a screenshot of the July 2019 email you allegedly received from staff at NBME informing you of the change in your Step 3 score, as well as payment summaries for a refund of your December 28, 2018 Step 3 examination fees. You noted that the refund was for the subsequent Step 3 application that was "voided" because of the change from a fail to a pass on your April 8, 2018 Step 3 administration.

A Joint Program of the Federation of State Medical Boards of the U.S., Inc. and NBME®



Federation of State Medical Boards of the U.S., Inc.
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(817) 868-4000
USMLE@fsmb.org
www.fsmb.org



NBME
3750 Market Street
Philadelphia, PA 19104
(215) 590-9500
Webmail@nbme.org
www.nbme.org

- On March 5, 2020, you sent an email to NBME as a follow up to your March 5, 2020 inquiry to the FSMB, and included the attachments you previously sent to the FSMB. On the same day, you also sent this email to RIDOH, including attachments.
- The NBME has no record of sending an email from “webmail@nbme.org” on July 8, 2019 to “paul_bowary@brown.edu.”
- A review of your USMLE record shows that FSMB issued you refunds for two Step 3 registration payments at your request via emails dated October 30, 2018 and July 31, 2019. You cited personal extenuating circumstances as the reason for the refund in both emails.
- A review of your USMLE examination history shows that you sat for Step 3 on April 8, 2018 and received a failing score of 192. You registered for Step 3 again on May 2, 2018 and chose an eligibility period of May 1, 2018 through July 31, 2018. You submitted a request on July 16, 2018 to extend your eligibility through October 31, 2018. On October 30, 2018, you emailed FSMB and requested that your application be terminated and your registration fees be refunded.
- You sat for Step 3 again on December 28, 2018 and received a failing score of 178. You reapplied for Step 3 on January 23, 2019 and selected an eligibility period of February 1, 2019 through April 30, 2019. You submitted a request on April 22, 2019 to extend your eligibility through July 31, 2019. You did not sit for the Step examination during this eligibility period, and requested a refund for the registration fees via email on July 31, 2019. FSMB issued the refund in August 2019, which is represented on the payment summary you attached to your March 5, 2020 emails to FSMB and NBME.
- NBME and FSMB confirmed that there is no record of you requesting a score recheck for your April 8, 2018 Step 3 examination.
- Because the score report you provided to FSMB, NBME, and RIDOH bearing your name and USMLE identification number contains false information, this matter was referred to the Office of the USMLE Secretariat.

Therefore, on the basis of this evidence, there is reason to believe you may have engaged in irregular behavior. For your reference, I am enclosing a copy of “*United States Medical Licensing Examination (USMLE) Policies and Procedures Regarding Irregular Behavior*” and “*USMLE Policies and Procedures Regarding Score Validity*.”

As explained in the Policies and Procedures regarding Irregular Behavior, all pertinent information will be reviewed by the USMLE Committee for Individualized Review. As explained in paragraph B.4, you may submit an explanation and/or any other relevant information you wish the Committee to consider when it reviews this matter. Please

forward any such information to me to arrive in my office by **June 1, 2020** for distribution to the Committee on Individualized Review before its meeting on **August 18-19, 2020**.

You also have the opportunity to appear personally before the Committee. You are not required to appear in person before the Committee, although you may elect to do so, with or without legal counsel. Your clear and concise written response to the issues raised in this letter will be given the same careful consideration by the Committee as a personal appearance. The Committee is primarily interested in hearing directly from you in your own words. Please keep this in mind if you elect to retain and appear before the Committee with counsel. If you wish to do so, please let me know by **June 1, 2020**. If you elect to appear in person, you will receive an email advising you to appear on one of two dates, either August 18 or 19, 2020. Due to potential travel restrictions related to COVID-19, it is possible that alternative arrangements regarding personal appearances will be necessary. We will update you (and your attorney, if applicable) with any changes.

Please note that your access to USMLE is suspended during the investigation.

If you have any questions about this matter, please do not hesitate to contact me at USMLESec@nbme.org.

Sincerely,

A handwritten signature in cursive script that reads "Amy Buono".

Amy Buono
Office of the USMLE Secretariat

c: ECFMG
FSMB
NBME

Attachment

***United States Medical Licensing Examination (USMLE)
Policies and Procedures Regarding the Validity of Passing Level Scores***

Introduction

The USMLE program is designed to produce high quality, reliable examinations. To that end, the USMLE program endeavors to ensure that test scores are comparable over administrations and support valid inferences, and to report and stand behind only those scores in which the program has confidence.

The following policies and procedures are intended to address situations in which the USMLE program has a good faith basis for questioning the validity of a passing level score¹. These policies and procedures do not apply to technical or administrative events or errors, to which other USMLE policies/procedures may apply. Policies and procedures regarding suspected irregular behavior, which may or may not affect score validity, are described in another document, entitled *USMLE Policies and Procedures Regarding Irregular Behavior*.

A. Policies

1. These policies and procedures address passing level examination results that might not represent a valid measure of an examinee's competence in the domains assessed by the examination. Aberrancies in performance below the passing level are addressed in the *USMLE Policies and Procedures Regarding Anomalous Performance*.
2. The fact that a question arises concerning the validity of a score does not necessarily imply that an examinee engaged in inappropriate behavior; irregular behavior is not the only basis upon which scores may be invalidated or reported with a qualification.
3. An examinee's passing level score will not be reported if staff and/or the Committee for Individualized Review (CIR) has a good faith basis for questioning whether it represents a valid measure of the examinee's competence in the domains assessed by the examination.
4. If otherwise eligible to test, an examinee whose scores have been determined by staff and/or the CIR to be invalid may retake an examination, unless the examinee's access to future administrations of the USMLE is restricted on the basis of another policy/procedure, such as a referral to CIR for possible irregular behavior.

¹ As used herein, "score" includes a passing level outcome on an examination for which a result but no score is reported.

5. These policies and procedures are intended to address most situations in which the validity of the passing score of an individual examinee is questioned. There may be circumstances, however, particularly involving multiple examinees, that are more appropriately addressed under other procedures. The USMLE program reserves the right to take whatever actions it deems appropriate if the CIR or USMLE Composite Committee concludes that alternative or supplemental procedures are warranted in response to a given set of facts or circumstances.

B. Procedures

1. These procedures are applicable to instances in which:
 - a) a good faith basis exists for questioning whether a passing level score represents a valid measure of an examinee's competence in the domains assessed by the examination; and
 - b) there is no evidence of errors in scoring; and
 - c) there is no reasonable basis for concluding that the examinee's scores were distorted by factors under the control of the test administration entities.
2. In such instances, staff will evaluate the concerns regarding score validity, will review any additional information available from examination records that may be relevant and may conduct further investigation as staff deem appropriate.
3. **If a question about score validity arises prior to the release of the score,** staff will notify the examinee and any other party to which scores would normally be reported that the reporting of the scores is being delayed pending further review, and ask the examinee to provide a response within 20 days. If the examinee fails to respond or otherwise does not provide an adequate explanation, staff may decide that the score should be canceled. Unless the examinee's access to the USMLE is restricted (see Paragraph A.4 above), the examinee will be given the option to retest or to ask that the CIR review the staff decision. If the examinee requests CIR review, the CIR will consider the matter based on all pertinent information, including the examinee's written submission and the information on which staff relied in deciding that the score should be canceled. The examinee shall not appear in person. If the CIR concludes that the questioned score should not be canceled, it will direct staff to report the examinee's scores. If the CIR determines that a good faith basis exists for questioning whether the score represents a valid measure, it shall direct staff to cancel the examinee's score. The examinee will have the option to retest and receive the score achieved on the retest. The decision of the CIR is final.

4. **If a question about score validity arises after a score has been released but less than one year from the date of the test administration,** staff will suspend further distribution of the questioned score, inform the examinee about the question, and request a response within 20 days. If the examinee fails to respond or otherwise does not provide an adequate explanation, staff may decide that the score should be canceled. Unless the examinee's access to USMLE is restricted (see Paragraph A.4 above), the examinee will be given the option to retest or to ask that the CIR review the staff decision. If the examinee requests CIR review, the CIR will consider the matter based on all pertinent information, including the examinee's written submission and the information on which staff relied in deciding that the score should be canceled. The examinee shall not appear in person. If the CIR concludes that the questioned score should not be canceled, it will direct staff to report the examinee's scores. If the CIR determines that a good faith basis exists for questioning whether the score represents a valid measure, it shall direct staff to cancel the examinee's score. The examinee will have the option to retest and receive the score achieved on the retest, or to appeal to the USMLE Composite Committee pursuant to Paragraph B.9 below.
5. **If the question about the validity of a score arises after the score has been released and more than one year after the date of the test administration,** staff shall follow the procedure set out in Paragraph B.4 above. In addition, before sending the initial notice of inquiry, staff shall consider the individual's status in USMLE sequence as well as educational and career progression with particular attention to beginning residency and obtaining licensure in light of the nature of the question about score validity and the role of the examination in protecting the health of the public.
6. In each instance described above, if investigation, including, e.g., communication with the examinee, discloses an explanation that staff concludes is reasonable and satisfactory, staff will report the examinee's scores and no further action will be taken pursuant to these policies and procedures.
7. If there is evidence of irregular behavior involving the examinee, *USMLE Policies and Procedures Regarding Irregular Behavior* will also apply. In instances involving suspected irregular behavior which raise concerns about the validity of scores, the CIR may review the evidence concerning either issue (score validity or irregular behavior) first and may proceed under either or both sets of policies and procedures, as the CIR deems appropriate and without requiring the CIR to conduct separate proceedings. If a score is canceled in connection with a finding of irregular behavior, and the examinee is permitted to retest, the examinee will be charged for the retest.
8. When an examinee's score is canceled pursuant to these policies and

procedures, the examinee and any other party that has received or would normally receive a report of the scores in question will be notified. The examinee's record and transcript will be annotated to show that the score is unavailable.

9. Provided that the examinee has not chosen to retest, a decision of the CIR made pursuant to Paragraph B.4 or B.5, above, may be appealed to the USMLE Composite Committee if the examinee involved has a reasonable basis to believe that the CIR did not act in compliance with applicable USMLE policies and/or procedures or that the decision of the CIR was clearly contrary to the weight of the evidence before it. The request for such an appeal must be received within 30 days of the date on which the notification advising the examinee of the CIR's decision was mailed to the examinee. Notice that the challenged score is under review will be included with USMLE transcripts issued during the pendency of such an appeal. The Composite Committee shall review the written record, consisting of all information available to the CIR, and the basis for appeal set forth by the examinee. The examinee shall not appear in person. If the Composite Committee finds that the CIR did not act in compliance with applicable USMLE policies and procedures or that the decision of the CIR was clearly contrary to the weight of the evidence, the Composite Committee may reverse the decision of the CIR or remand the matter to the CIR or to staff for further consideration. Otherwise, the determination of the CIR will stand, and, unless the examinee's access to the USMLE is restricted (see Paragraph A.4 above), the examinee will be allowed to retest. If the Composite Committee reverses the decision of the CIR, all entities having received USMLE transcripts showing that the score was unavailable will be notified of the decision of the Composite Committee and provided with updated transcripts.
10. If an examinee's score is canceled under these procedures, and the examinee retests, the examinee will not be charged for the retest,² unless the score was canceled in connection with a finding of irregular behavior.

² Only one retest without charge will be given. If the examinee does not pass the retest, they will be charged for subsequent attempts at the exam.

***United States Medical Licensing Examination (USMLE)
Policies and Procedures Regarding Irregular Behavior***

Introduction

The following policies and procedures regarding irregular behavior are intended to protect the integrity of the USMLE examination program. If the irregular behavior creates a good faith basis for questioning the validity of an examinee's scores, the policies and procedures described in another document, entitled *USMLE Policies and Procedures Regarding the Validity of Passing Level Scores*, may also be applicable.

A. Policies

1. *Irregular behavior* includes all actions or attempted actions on the part of applicants, examinees, potential applicants, or others that could subvert the examination process. Examples of irregular behavior include, but are not limited to: failing to comply with any USMLE policy, procedure, and/or rule; seeking and/or obtaining unauthorized access to examination materials; providing false information; impersonating an examinee or having someone else test in one's place; giving assistance to or receiving assistance from another individual in answering test items; possessing unauthorized items, equipment or materials during an examination; altering or misrepresenting examination scores; engaging in disruptive or unprofessional behavior at a test center; theft of examination materials; unauthorized reproduction by any means and/or dissemination of examination content or other copyrighted materials; posting or discussing examination content on any website, or asking others to do so; and taking any other action that could give an inappropriate advantage to individuals who might be taking the examination.
2. If the USMLE Committee for Individualized Review ("CIR") determines that irregular behavior has occurred, an annotation to that effect will be entered in the USMLE record of the examinee, and this annotation will appear on applicable score reports (if scores are reported) and on transcripts for that examinee. Information regarding the decision of the CIR and the basis for such decision may also be provided to legitimately interested entities, including the Federation of State Medical Boards' Physician Data Center.
3. If the CIR determines, in its discretion, that an individual engaged in irregular behavior that is sufficiently serious to warrant such action, the individual may be barred from future administrations of USMLE or subjected to special procedures for taking future USMLE examinations, in addition to being subject to the actions described in Paragraph A.2, above.

4. A CIR finding of irregular behavior may be appealed by the affected individual to the USMLE Composite Committee in accordance with Paragraph B.8, below. The pendency of an appeal, however, will not stay or delay implementation of the CIR's decision.

B. Procedures

1. After acquiring information suggesting irregular behavior on the part of an individual from third-party reports, statistical analysis, fact investigation, or otherwise, staff will assess whether there is sufficient evidence to conclude that irregular behavior may have occurred. Staff will conduct a follow-up investigation to gather additional information when necessary.
2. If the staff analysis and/or follow-up investigation will not be concluded until after the typical period for the reporting of scores, the examinee and the entity to which scores would normally be reported will be notified that the reporting of the scores in question is being delayed pending further review.
3. If, at the conclusion of its investigation and analysis, staff finds that there is a reasonable basis to conclude that an individual has engaged in irregular behavior, the matter will be referred to the CIR. If the individual is an examinee, his/her scores will be withheld if not already released, and the individual might not be permitted to sit for subsequent examinations, nor will Step applications be processed, pending a decision by the CIR.
4. If a potential irregular behavior incident is referred to the CIR, the individual involved will be notified using the individual's last known email and postal address and provided with a copy of the applicable USMLE policies and procedures. The individual will be advised of the information which initiated the investigation and relevant findings of the investigation. The individual will be given an opportunity to provide an explanation for the facts described in the findings and to present other relevant information. The individual may request the opportunity to appear personally before the CIR. If the individual involved appears personally before the CIR, the oral presentation will be made under oath and a stenographic or audio recording may be made at the election of the CIR.
5. The CIR will consider all available pertinent information in deciding whether an individual engaged in irregular behavior, including the record assembled by staff, statistical analyses employed by staff (if any), and any explanation or other information that the individual may provide. If the CIR determines that there is a good faith basis for concluding that irregular behavior has occurred, the affected individual will be notified and informed of the right to appeal the CIR decision in accordance with Paragraph B.8, below. Regardless of whether an appeal is taken, an annotation indicating the nature of the irregular behavior will be entered immediately in the individual's USMLE record. This annotation will appear on the applicable score report (if scores are released) and on transcripts for the

individual. At the discretion of the CIR, information regarding a CIR finding of irregular behavior may also be provided to legitimately interested entities, including but not limited to the entity that certified the individual's eligibility for the examination in question, a medical education or training program in which the individual has participated or is participating at the time of the CIR's decision, and/or the FSMB's Physician Data Center. All medical licensing authorities that have received a score report or transcript for this individual in the past will receive an updated transcript and/or score report which reflects the CIR's decision.

6. If suspected irregular behavior raises concerns about the validity of a USMLE score, staff and/or the CIR may elect to review the matter and to proceed under these policies and procedures and/or under the *USMLE Policies and Procedures Regarding the Validity of Passing Level Scores*, as staff and/or the CIR deem appropriate and without requiring staff and/or the CIR to conduct separate proceedings.
7. In the event of irregular behavior that the CIR deems, in its discretion, to be sufficiently serious to warrant such action, the CIR may bar the individual from future examinations and/or implement special procedures for administering future examinations to the affected individual. If an individual is barred from future examinations, the CIR may allow for testing after a specified minimum time, upon petition of a medical licensing authority.
8. A decision of the CIR may be appealed to the USMLE Composite Committee if the individual involved has a reasonable basis to believe the CIR did not act in compliance with applicable USMLE policies and/or procedures or that the CIR's decision was clearly contrary to the weight of the evidence before it. The appeal must be received within 30 days of the date on which the notice of the CIR's decision was mailed to the individual. If the score for the examinee and CIR findings are reported during the pendency of the appeal, the recipient of the report will be informed that the individual is appealing the decision. The Composite Committee will decide appeals based upon a written record, including all information available to the CIR, a transcript of the recording made during the individual's appearance before the CIR (if there was such an appearance and it was transcribed), and the basis for appeal set forth by the individual. Neither the individual who is the subject of a CIR decision nor anyone representing that individual shall be entitled to appear in person before the Composite Committee. If the Composite Committee determines that the CIR did not act in compliance with applicable USMLE policies and procedures and/or that the decision of the CIR was clearly contrary to the weight of the evidence, the Composite Committee may reverse the decision of the CIR or remand the matter to the CIR or staff for further consideration. If the Composite Committee reverses the decision of the CIR to annotate the individual's USMLE record, all entities that received USMLE transcripts or score reports showing irregular behavior will be notified of the decision of the Composite Committee and provided with an updated transcript and/or score report. Otherwise, the determination of the CIR will stand.

EXHIBIT H

FRIEDMAN ■ FRAMME

■ THRUSH ■

ATTORNEYS AT LAW

COPY

PRINCIPALS

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TINA KINGWOOD (VA)
STEPHANIE EVANS (VA, CT)

May 26, 2020

US MLE

Secretariat

Amy Buono

3750 Market Street

Philadelphia, PA 19104

**Re: Paul Bowary
Score**

Our File: RI-S75-Z72

Dear Ms. Buono:

Please accept this letter on behalf of Paul Bowary in response to your letter of April 27, 2020. In that letter, it has been alleged that Mr. Bowary has engaged in illegal behavior and that his USMLE step 3 score is fraudulent. That determination is counter to the information that has already been provided by Mr. Bowary.

In support of his objection to this finding, I have enclosed the USMLE report for the exam of April 8, 2018 indicating a passing score of 199. As you are aware this was the subsequent score issued by USMLE after the original failing score. This score was issued after Mr. Bowary had contacted NBME regarding his April 2018 score. Mr. Bowary has already provided to you the email from NBME pertaining to his revised score. I have also attached an email from Examinee Support Services at NBME explaining the revised score.

It is clear from the documents, paper trail and email strings that Mr. Bowary had initiated an inquiry with NBME after receiving his initial score for the April 2018 step 3 test. That inquiry resulted in responses from them and eventually a revised score (enclosed). The allegation that somehow Mr. Bowary fraudulently created an email in support of his revised score is insulting to Mr. Bowary and false. In addition to the alleged "email", there are other reports and correspondence that support the revised score. To conclude that his score was the result of illegal behavior would require multiple fraudulent documents that fly in the face of the facts.

On Tuesday, March 17, 2020, Nicole Miller explained in detail how she would like that Dr Bowary download the "original format of the email" he received from NBME in July 2019 and email it to her as an attachment. Dr Bowary ended up sending the original email with passing score report as attachment exactly as Ms Miller had requested. On March 25, 2020, Ms Miller acknowledged the receipt of this email from Dr Bowary. After reviewing Dr Bowary's email conversations with Ms Miller, it appears that Ms Miller had been diligently looking for this specific email format. On

every occasion where Dr Bowary had sent the email in a different format (forwarded or screenshotted versions), Ms Miller had made it a point to redirect Dr Bowary towards attaching the email in its original format. Thus, her acknowledgment of the receipt of this original email from Dr Bowary on March 25, 2020, makes your following quoted statement inaccurate, dismissive of the evidence and subsequently engaged in building a false conspiracy theory against Dr Bowary: *"The NBME has no record of sending an email from "webmail@nbme.org" on July 8, 2019 to paul.bowary@brown.edu."* Again, as of March 25th, 2020, Ms Miller has been in possession of the clear-cut evidence that Dr Bowary did in fact receive the revised score and explanation from NBME. Any delays in closing that investigation as well as any false accusations addressed after March 25th, 2020, must be expected to have serious legal consequences.

On behalf of Mr. Bowary, he is requesting that he be allowed to appear before the committee with counsel. Please indicate that date for his appearance. Furthermore, if there is any other information or clarification required please advise.

Please respond in writing within 10 days and direct your response to the physical address, email address or facsimile number provided.

Thank you for your prompt attention to this matter.

Very Truly Yours



Edward R. McCormick, III
Friedman, Framme & Thrush, P.A.

Enclosure

cc: Paul Bowary

EXHIBIT I

PROPRIETARY AND CONFIDENTIAL MATERIALS. NOT FOR DISTRIBUTION

From: Bowary, Paul
To: [USMLESec](#)
Subject: Please bring to the attention of Amy Buono - Re: Referral to USMLE Committee for Individualized Review –
Date: Monday, June 01, 2020 9:53:36 PM
Attachments: [image001.png](#)
[image002.png](#)
[Friedman, Framme & Thrush - Lawyer Letter.pdf](#)

Dear Amy,

After reading this email today, I suspected you have not yet received my lawyer's letter. Please see attached a copy of that letter and be on the lookout for it.

Your email back in April was probably the most insulting thing I have ever read. It quickly became clearer to me that it is not safe for me anymore to handle this alone.

The delays of your investigation ignored all my professional deadlines and the unreasonable conclusions in your letter dismissed the fact-checking done by Nicole Miller.

For the record, I "never" provided any party with any information that I even suspected was false. When FCVS reported failed scores; I was surprised and I immediately reached out to

- 1) UA department
- 2) then FSMB
- 3) then NBME
- 4) then FSMB again
- 5) and finally DOH to let them know what is going (while under the impression you guys are investigating the reason why one of your employees did not close the loop with FSMB; I had no idea you are investigating my own genuinity).

Your formulation stating that I have shared incorrect information with anyone is deceiving especially that it does not just question my morals.. but also my judgement clarity. Why would I wait until FCVS collects my scores for me to create this issue?

Finally, the fact that you questioned the nature of my refund request sounds like a witch hunt. It is true that I shared some personal and financial constraints when I requested my refund.. which is simply because I had internalized so much shame around my test score issue that I did not feel like bringing it up again. The issues I shared and the re-scoring reality are not mutually exclusive. I just thought: once FSMB will get my refund request, they will access my file and be reminded that I am eligible for a refund anyway.

Please go ahead and schedule that virtual CIR meeting and please account for the virtual presence of a lawyer - as my understanding is that this meeting occurrence will mark the start of official legal proceedings. I am happy to go through my email inbox on camera in presence of a lawyer.

Amy, please acknowledge the receipt of this email in person. Please respond to my lawyer and myself with dates.

Thank you.
Best,
Paul Bowary

On Mon, Jun 1, 2020 at 8:07 AM USMLESec <USMLESec@nbme.org> wrote:

Dear Dr. Bowary:

I have an important update to share with you regarding your referral to the August 18-19, 2020 USMLE Committee for Individualized Review (CIR) meeting.

Due to health and travel restrictions related to the COVID-19 pandemic, the August meeting of CIR will be conducted remotely. To make a personal appearance before the Committee under these circumstances, you may submit a 15-minute long pre-recorded video in mp4 format, or you can appear before the Committee during the meeting via video or teleconference.

If you elect to appear virtually, you will receive an email advising you to appear on either August 18 or 19. Prior to the meeting, we will schedule time with you to ensure that you are familiar with the technology being utilized at the meeting.

Please note that your deadline to submit written materials is today, June 1, 2020. Should you choose to submit a pre-recorded video in mp4 format, please inform me in writing of this decision and I will contact you with a deadline for your video submission.

Kindly acknowledge receipt of this email as soon as possible.

Stay well,

Amber Montañano

AMBER MONTAÑANO

Program Manager

Office of the USMLE Secretariat

T +1 215-590-9873

E usmlesec@nbme.org

W usmle.org



3750 Market Street, Philadelphia PA 19104, USA

From: USMLESec <USMLESec@nbme.org>

Sent: Monday, April 27, 2020 11:50 AM

To: Bowary, Paul <paul_bowary@brown.edu>

Subject: Referral to USMLE Committee for Individualized Review – August 18-19, 2020:
Paul Bowary, USMLE ID 08992844

Dear Dr. Bowary:

Please review the attached documents and respond by the requested deadlines. If you would like to receive a hard copy of this correspondence, please confirm your address.

If you have any questions or concerns, please feel free to contact my office at

USMLESec@nbme.org.

Sincerely,

Nicole Miller
Program Manager

Office of the USMLE Secretariat

T +1 215-495-6136

E USMLESec@nbme.org

W nbme.org



3750 Market Street, Philadelphia PA 19104, USA

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--

Paul Bowary, M.D.
PGY-IV Psychiatry Resident
APA New England/Eastern Canada RFM Rep
Butler Hospital/ Brown University, DPHB
(VM) 401-455-6200 x26133



This is an external email. Do not click on links or open attachments unless you trust the sender.

EXHIBIT J



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STEPHANIE EVANS (VA, CT)

June 26, 2020

US MLE
Program Manager
Office of the USMLE Secretariat
Nicole Miller
3750 Market Street
Philadelphia, PA 19104

**Re: Paul Bowary
Score**

Our File: RI-S75-Z72

Dear Ms. Miller:

Please accept this letter on behalf of Paul Bowary as a follow up and further submission to the CIR. Mr. Bowary would like to express that at no time did he provide provided any party with any information that he even suspected to be false. When FCVS reported failed scores, he was surprised and he immediately reached out to:

- 1) UA department
- 2) then FSMB
- 3) then NBME
- 4) then FSMB again
- 5) and finally DOH to let them know what his status was.

He further adds that your formulation stating that he has shared incorrect information with anyone is deceiving especially that it does not just question his morals, but also his judgement clarity.

I trust that all of the prior emails and documents he has provided have been made a part of his submission.

Thank you for your prompt attention to this matter.

Very Truly Yours

Edward R. McCormick, III
Friedman, Framme & Thrush, P.A.

cc: Paul Bowary,

EXHIBIT K

From: [USMLESec](#)
To: paul_bowary@brown.edu
Cc: [Edward McCormick, ESQ](#); [Tracey Guthrie](#); Alexandra.Bernard.CTR@health.ri.gov; nicole.alexanderscott@health.ri.gov
Subject: August 18-20, 2020 Committee for Individualized Review Decision Letter: Paul Bowary, USMLE ID: 08992844
Date: Wednesday, September 23, 2020 11:56:52 AM
Attachments: [Bowary - Decision Letter.pdf](#)
[USMLE Policies and Procedures re Irregular Behavior.pdf](#)
[image002.png](#)

Dear Dr. Bowary:

Please review the attached document. If you would like to receive a hard copy of this letter, please confirm your address.

If you have any questions or concerns, please feel free to contact my office at USMLESec@nbme.org.

Sincerely,
Amber Montañano

AMBER MONTAÑANO
Program Manager
Office of the USMLE Secretariat

T +1 215-590-9873
E usmlesec@nbme.org
W usmle.org



3750 Market Street, Philadelphia PA 19104, USA



Via Email
Personal and Confidential

September 23, 2020

Paul Bowary
20 Mission Place
Providence, RI 02908

USMLE ID#: 0-899-284-4

Email: paul_bowary@brown.edu

Dear Dr. Bowary:

I am writing to inform you that the USMLE Committee for Individualized Review ("CIR") has completed its review of the allegation that you engaged in irregular behavior by altering or misrepresenting examination scores.

In advance of the review, the CIR members were provided with copies of the following materials: (a) my letter to you dated April 27, 2020; (b) an email from your email address on record to the Federation of State Medical Boards (FSMB), which included three JPEG attachments: 1) a falsified USMLE Step 3 score report, bearing your name and USMLE identification number, an exam date of April 8, 2018, with a passing score of 199; 2) a screenshot of a July 2019 email you allegedly received from staff at NBME informing you of a change to your Step 3 score; and 3) payment summaries for a refund of Step 3 examination fees; (c) an email to NBME as a follow up to your March 5, 2020 inquiry to the FSMB, which included the attachments you previously sent to the FSMB; (d) a falsified USMLE Step 3 score report scanned to PDF format sent to FSMB on March 6, 2020, bearing your name and USMLE identification number, an exam date of April 8, 2018, with a passing score of 199; (e) a falsified USMLE Step 3 score report in PDF format created on March 6, 2020 sent to the Office of the USMLE Secretariat also on March 6, 2020, bearing your name and USMLE identification number, an exam date of April 8, 2018, with a passing score of 199; (f) an analysis of the falsified score report conducted by NBME staff; (g) an analysis of the properties of the email allegedly sent to you in July 2019 from webmail@nbme.org conducted by NBME staff; (h) emails provided by FSMB confirming you requested Step 3 examination fee refunds due to extenuating circumstances; (i) correspondence between you and staff in the Office of the USMLE Secretariat; (j) correspondence between you, the Residency Training Director for the Brown University General Psychiatry Residency Program, and staff in the Office of the USMLE Secretariat; (k) correspondence between you, staff at the Rhode Island Department of Health (RIDOH) and staff in the Office of the USMLE Secretariat; (l) your examination history and biographical information; and (m) your written personal statement to the CIR, submitted on your behalf by your attorney, Mr. Edward R. McCormick, III.

A Joint Program of the Federation of State Medical Boards of the U.S., Inc. and NBME®



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www.usmle.org

In its deliberations, the Committee reviewed the foregoing information and noted the following:

- On March 5, 2020, you sent an email to FSMB inquiring about your USMLE Step 3 score, in relation to your application for a medical license in Rhode Island. You stated that you were informed via email from webmail@nbme.org in July 2019 that NBME had rechecked your Step 3 score and that you had passed your April 8, 2018 administration, which was previously reported as a fail. You attached a USMLE Step 3 score report to the email, bearing your name and USMLE identification number, an exam date of April 8, 2018, and a passing score of 199.
- In your email to FSMB, you attached a screenshot of the July 2019 email you allegedly received from staff at NBME informing you of the change in your Step 3 score, as well as payment summaries for a refund of Step 3 examination fees. You noted that the refund was for a subsequent Step 3 application that was “voided” because of the change from a fail to a pass on your April 8, 2018 Step 3 administration.
- On March 5, 2020, you sent an email to NBME as a follow up to your March 5, 2020 inquiry to the FSMB and included the attachments you previously sent to the FSMB. On the same day, you also sent this email to RIDOH, including the attachments.
- NBME IT staff confirmed there is no record of sending an email from webmail@nbme.org on July 8, 2019 to “paul_bowary@brown.edu.”
- A review of your USMLE record shows that FSMB issued you refunds for two Step 3 registration payments, at your request, via emails dated October 30, 2018 and July 31, 2019. You cited personal extenuating circumstances as the reason for the refund in both emails.
- A review of your USMLE examination history shows that you sat for Step 3 on April 8, 2018 and received a failing score of 192. You registered for Step 3 again on May 2, 2018 and chose an eligibility period of May 1, 2018 through July 31, 2018. You submitted a request on July 16, 2018 to extend your eligibility through October 31, 2018. On October 30, 2018, you emailed FSMB and requested that your application be terminated and your registration fees be refunded.
- You sat for Step 3 again on December 28, 2018 and received a failing score of 178. You reapplied for Step 3 on January 23, 2019 and selected an eligibility period of February 1, 2019 through April 30, 2019. You submitted a request on April 22, 2019 to extend your eligibility through July 31, 2019. You did not sit for the Step examination during this eligibility period and requested a refund for the registration fees via email on July 31, 2019. FSMB issued the refund in August 2019, which is

represented on the payment summary you attached to your March 5, 2020 emails to FSMB and NBME.

- NBME and FSMB confirmed that there is no record of you requesting a score recheck for your April 8, 2018 Step 3 examination. Your explanation of how you obtained a score recheck did not match NBME or FSMB protocol for the score recheck process. It is also published in the USMLE *Bulletin of Information* that the score recheck process has never resulted in a score change.
- NBME staff analyzed the falsified score reports attached to the March 5 and 6, 2020 emails sent to FSMB, NBME, the Office of the USMLE Secretariat and the Rhode Island Department of Health and noted inconsistencies from an authentic score report, including obvious changes to the pass/fail outcome and the numeric score. The falsified score reports were in various formats differing from the format of an authentic score report— including jpeg files and a scanned document converted to a pdf.
- Staff compared the falsified pdf score report sent to the Office of the USMLE Secretariat on March 6, 2020 to the authentic report and noted the following: the authentic score report from your April 8, 2018 administration is a pdf file created on April 29, 2018 while the falsified score report is a PDF file created on March 6, 2020 using a program called “JPL Ghostscript,” a different program than the one used to generate authentic score reports.
- NBME staff analyzed the email allegedly sent from webmail@nbme.org in July 2019 and noted inconsistencies from an authentic email which would be sent from this email address, including information contained in the email headers. Additionally, no record of this email was found in NBME’s IT records. Inconsistencies within the email itself also indicated that it is a fabrication; for example, the email was not signed by an NBME employee and the name of the subunit listed in the email signature – Examinee Support Services – was changed to Customer Operations Management in 2017.
- In your written personal statement, you stated that the allegation that you falsified your score is insulting and false, and that you never provided any party with information that you suspected to be false.
- In your testimony before the CIR, you stated, “If you will review every email I sent, you will see that I never requested a score recheck.” You added that you were unaware a score recheck would be performed and stated that the NBME customer service representative performed the service without your request. However, in your March 5, 2020 email to FSMB, you stated that you submitted a score recheck directly to the “secretariat office” with the help of an NBME customer service representative.

- When asked by the committee how this score report alteration could have occurred, you stated that you have no theories as to how the score report was falsified or why NBME has no record of the email you allegedly received from NBME in July 2019.

Following careful consideration of all of the information available, the CIR determined that you engaged in irregular behavior. In reaching this decision, the CIR made the following findings:

- In connection with your applications for USMLE, you certified that you read and were familiar with the contents of the USMLE *Bulletin of Information* and agreed to abide by the policies and procedures described therein.
- You were advised in the USMLE *Bulletin of Information* that altering or misrepresenting examination scores constitutes irregular behavior.
- You falsified a Step 3 score report and provided it to FSMB, NBME, and RIDOH.
- You fabricated an email from NBME to support the authenticity of the falsified Step 3 score report.

In accordance with “*USMLE Policies and Procedures Regarding Irregular Behavior*,” a copy of which was included with my April 27, 2020 letter to you, your USMLE record will include an annotation showing that the CIR determined you engaged in irregular behavior. Therefore, any USMLE transcripts sent to you or any third party will include this annotation. When you submit requests for USMLE transcripts to be sent to third parties, the transcripts will be accompanied by information regarding the decision of the CIR. Such information would be based on the content of this letter and the documents referenced in it.

Further, the Committee determined that information regarding its decision will be reported to the Physician Data Center of the Federation of State Medical Boards.

As explained in paragraph B.7 of the Policies and Procedures, in the event of irregular behavior that the CIR, in its discretion, determines to be sufficiently serious to warrant such action, the CIR may decide that the examinee be barred from future examinations. The CIR found such conditions applicable in this instance and has decided to bar you for a minimum of three years from registering for or taking future administrations of USMLE for which you are otherwise eligible (i.e. until August 20, 2023 if you have maintained your eligibility continuously up until that date). Periods of ineligibility will not count toward this three-year bar. After August 20, 2023, the bar may be lifted if the USMLE program receives from a U.S. medical licensing authority, after full disclosure to it of the events that led to the imposition of the bar, a request to allow you to sit for USMLE examinations.

As explained in paragraph B.8 of same Procedures, you have the right to appeal the decision of the CIR to the USMLE Composite Committee by sending a request for appeal within 30 days of the date of this letter, if you have a reasonable basis to believe that the

CIR did not act in compliance with applicable USMLE Policies and/or Procedures or that the decision of the CIR was clearly contrary to the weight of the evidence before it.

If you have any questions about this matter, please do not hesitate to contact me at USMLESec@nbme.org.

Sincerely,

A handwritten signature in black ink that reads "Amy Buono". The signature is written in a cursive, flowing style.

Amy Buono
Office of the USMLE Secretariat

c: ECFMG
FSMB
NBME
Mr. Edward R. McCormick, III, Esq.
The Rhode Island Department of Health
Tracey Guthrie, M.D.

***United States Medical Licensing Examination (USMLE)
Policies and Procedures Regarding Irregular Behavior***

Introduction

The following policies and procedures regarding irregular behavior are intended to protect the integrity of the USMLE examination program. If the irregular behavior creates a good faith basis for questioning the validity of an examinee's scores, the policies and procedures described in another document, entitled *USMLE Policies and Procedures Regarding the Validity of Passing Level Scores*, may also be applicable.

A. Policies

1. *Irregular behavior* includes all actions or attempted actions on the part of applicants, examinees, potential applicants, or others that could subvert the examination process. Examples of irregular behavior include, but are not limited to: failing to comply with any USMLE policy, procedure, and/or rule; seeking and/or obtaining unauthorized access to examination materials; providing false information; impersonating an examinee or having someone else test in one's place; giving assistance to or receiving assistance from another individual in answering test items; possessing unauthorized items, equipment or materials during an examination; altering or misrepresenting examination scores; engaging in disruptive or unprofessional behavior at a test center; theft of examination materials; unauthorized reproduction by any means and/or dissemination of examination content or other copyrighted materials; posting or discussing examination content on any website, or asking others to do so; and taking any other action that could give an inappropriate advantage to individuals who might be taking the examination.
2. If the USMLE Committee for Individualized Review ("CIR") determines that irregular behavior has occurred, an annotation to that effect will be entered in the USMLE record of the examinee, and this annotation will appear on applicable score reports (if scores are reported) and on transcripts for that examinee. Information regarding the decision of the CIR and the basis for such decision may also be provided to legitimately interested entities, including the Federation of State Medical Boards' Physician Data Center.
3. If the CIR determines, in its discretion, that an individual engaged in irregular behavior that is sufficiently serious to warrant such action, the individual may be barred from future administrations of USMLE or subjected to special procedures for taking future USMLE examinations, in addition to being subject to the actions described in Paragraph A.2, above.

4. A CIR finding of irregular behavior may be appealed by the affected individual to the USMLE Composite Committee in accordance with Paragraph B.8, below. The pendency of an appeal, however, will not stay or delay implementation of the CIR's decision.

B. Procedures

1. After acquiring information suggesting irregular behavior on the part of an individual from third-party reports, statistical analysis, fact investigation, or otherwise, staff will assess whether there is sufficient evidence to conclude that irregular behavior may have occurred. Staff will conduct a follow-up investigation to gather additional information when necessary.
2. If the staff analysis and/or follow-up investigation will not be concluded until after the typical period for the reporting of scores, the examinee and the entity to which scores would normally be reported will be notified that the reporting of the scores in question is being delayed pending further review.
3. If, at the conclusion of its investigation and analysis, staff finds that there is a reasonable basis to conclude that an individual has engaged in irregular behavior, the matter will be referred to the CIR. If the individual is an examinee, his/her scores will be withheld if not already released, and the individual might not be permitted to sit for subsequent examinations, nor will Step applications be processed, pending a decision by the CIR.
4. If a potential irregular behavior incident is referred to the CIR, the individual involved will be notified using the individual's last known email and postal address and provided with a copy of the applicable USMLE policies and procedures. The individual will be advised of the information which initiated the investigation and relevant findings of the investigation. The individual will be given an opportunity to provide an explanation for the facts described in the findings and to present other relevant information. The individual may request the opportunity to appear personally before the CIR. If the individual involved appears personally before the CIR, the oral presentation will be made under oath and a stenographic or audio recording may be made at the election of the CIR.
5. The CIR will consider all available pertinent information in deciding whether an individual engaged in irregular behavior, including the record assembled by staff, statistical analyses employed by staff (if any), and any explanation or other information that the individual may provide. If the CIR determines that there is a good faith basis for concluding that irregular behavior has occurred, the affected individual will be notified and informed of the right to appeal the CIR decision in accordance with Paragraph B.8, below. Regardless of whether an appeal is taken, an annotation indicating the nature of the irregular behavior will be entered immediately in the individual's USMLE record. This annotation will appear on the applicable score report (if scores are released) and on transcripts for the

individual. At the discretion of the CIR, information regarding a CIR finding of irregular behavior may also be provided to legitimately interested entities, including but not limited to the entity that certified the individual's eligibility for the examination in question, a medical education or training program in which the individual has participated or is participating at the time of the CIR's decision, and/or the FSMB's Physician Data Center. All medical licensing authorities that have received a score report or transcript for this individual in the past will receive an updated transcript and/or score report which reflects the CIR's decision.

6. If suspected irregular behavior raises concerns about the validity of a USMLE score, staff and/or the CIR may elect to review the matter and to proceed under these policies and procedures and/or under the *USMLE Policies and Procedures Regarding the Validity of Passing Level Scores*, as staff and/or the CIR deem appropriate and without requiring staff and/or the CIR to conduct separate proceedings.
7. In the event of irregular behavior that the CIR deems, in its discretion, to be sufficiently serious to warrant such action, the CIR may bar the individual from future examinations and/or implement special procedures for administering future examinations to the affected individual. If an individual is barred from future examinations, the CIR may allow for testing after a specified minimum time, upon petition of a medical licensing authority.
8. A decision of the CIR may be appealed to the USMLE Composite Committee if the individual involved has a reasonable basis to believe the CIR did not act in compliance with applicable USMLE policies and/or procedures or that the CIR's decision was clearly contrary to the weight of the evidence before it. The appeal must be received within 30 days of the date on which the notice of the CIR's decision was mailed to the individual. If the score for the examinee and CIR findings are reported during the pendency of the appeal, the recipient of the report will be informed that the individual is appealing the decision. The Composite Committee will decide appeals based upon a written record, including all information available to the CIR, a transcript of the recording made during the individual's appearance before the CIR (if there was such an appearance and it was transcribed), and the basis for appeal set forth by the individual. Neither the individual who is the subject of a CIR decision nor anyone representing that individual shall be entitled to appear in person before the Composite Committee. If the Composite Committee determines that the CIR did not act in compliance with applicable USMLE policies and procedures and/or that the decision of the CIR was clearly contrary to the weight of the evidence, the Composite Committee may reverse the decision of the CIR or remand the matter to the CIR or staff for further consideration. If the Composite Committee reverses the decision of the CIR to annotate the individual's USMLE record, all entities that received USMLE transcripts or score reports showing irregular behavior will be notified of the decision of the Composite Committee and provided with an updated transcript and/or score report. Otherwise, the determination of the CIR will stand.

EXHIBIT L

This is an analysis of the falsified score report PDF sent to the Secretariat's office, completed by an NBME staff member.

Report on Falsified Score Report for Paul Bowary

1. This is a report on an altered USMLE Step 3 score report for Paul Bowary, USMLE ID 0-899-284-4. Dr. Bowary is a May 2014 graduate of American University of Beirut Faculty of Medicine. He has applied to take Step 3 five times but tested only twice. For the other three applications, he has terminated one and didn't schedule nor test during his eligibility period for two others. Of the two Step 3 attempts he did complete,
 - a. On his 4/8 - 4/10/2018 attempt, he failed with a score of 192, reported on 5/2/2018. The minimum passing score for Step 3 at that time was 196.
 - b. On his 12/28 - 12/29/2018 attempt, he failed with a score of 178, reported on 1/23/2019. The minimum passing score for Step 3 at that time was 196.
2. The submitted PDF of the Step3 score report displays these features:
 - a. The name shown is Paul Bowary, USMLE_ID 0-899-284-4, with test date of April 8, 2018, and is labeled a PASS with a score of 199.
 - b. Minimum Passing Score of 196 cited in the 2nd text box is true for examinations taken between January 2016 and December 2019.
 - c. The Standard Error of Measurement (SEM) and also the Mean and Standard Deviation for first-time US/Canadian examinees between January 1, 2017 and December 31, 2017 displayed in 2nd text box are true for score reports released between February 28, 2018 and January 23, 2019.
 - d. The Score Categories displayed on the page 2 Performance Profile are those shown on Step 3 score reports released between February 24, 2016 and January 23, 2019.
 - e. Given the points in b, c, d above, this score report is from an administration reported between February 2018 and January 2019, which coincides with Dr. Bowary's first complete Step 3 attempt in April 2018.
 - f. There are 21 Score Categories on the page 2 Performance Profile.
 - i. USMLE reported these 21 categories on Step 3 score reports released between February 24, 2016 and January 23, 2019.
 - ii. There are 81,372 Step 3 score reports reported during this time span with these 21 categories.
 - iii. Only one score report matches exactly on all 21 categories, that for Dr. Bowary's April 2018 attempt. So, this performance profile is that reported to him on May 2, 2018.
 - g. The "PASS" and "199" are in a typeface point size much larger than on actual USMLE score reports from that time. These two items of the score report are clear falsifications. The other text and performance profile bands appear to be unaltered.
3. Examining the PDF of the Step 3 score report reveals...
 - a. The password protection has been removed and Advanced Document Properties shows that the PDF Producer is "GPL Ghostscript 9.05". Ghostscript can be used as a file format converter, such as from a password protected PDF to another file format and then even back to PDF. This is not the software that creates actual USMLE score reports. Thus, an actual USMLE score report has been modified with GPL Ghostscript.

- b. As noted previously, the “PASS” and “199” are obvious alterations of the original score report.
- c. The uniqueness of the performance profile band must be recognized. Out of over 80,000 Step 3 score reports with these score categories, only that from Dr. Bowary’s April 2018 attempt matches on all 21 categories. The next closest match is on only 7 categories. If Dr. Bowary’s total test score were to have changed upon rescoring, which it surely has not, but if it were to have changed, the rescoring would have produced a different performance profile because the underlying subscores would have changed, too.

In conclusion, there is convincing evidence that the submitted Step 3 score report PDF is an alteration of the actual score report of Paul Bowary from his April 2018 attempt, in which the pass/fail outcome and total score have been altered and done so rather obviously. No other element on the score report appears to have been altered.

EXHIBIT M

Examinee Fraudulent Email Analysis – Proof of Concept

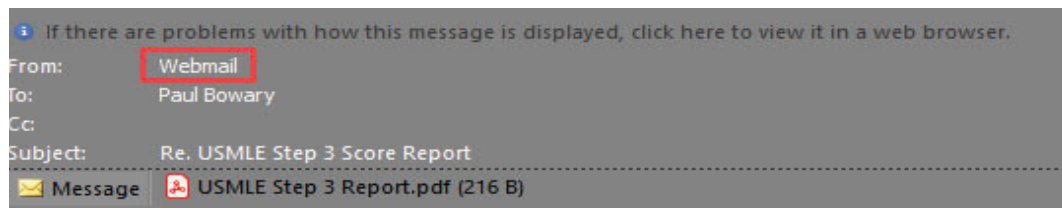
In response to the situation where the USMLE Secretariat received a fraudulent email attachment from an examinee who claimed it was an actual email they received from Webmail@nbme.org. IT Security performed a technical analysis resulting in evidence that proves the email was not sent from the actual Webmail@nbme.org address. Based on our analysis, we suspect that email spoofing¹ occurred.

I. Evidence

1. Generating Fraudulent Emails

The email sent as an attachment from the examinee paul_bowary@brown.edu that was claimed to be a legitimate email from Webmail@nbme.org could have been easily forged by leveraging a local mail server on their own computer and populating the “To/From” addresses manually using a wide variety of tools.

A screenshot of the fraudulent email is shown below showing the “From” address.



Dear Dr Bowary,

I apologize for the delay. I appreciate your patience throughout this whole process.

Please be advised that our communication, including this email, is as confidential examination programs. However, given the nature and timeline of this issue in your advise them to contact NBME with any questions or concerns.

Dr Bowary, I appreciate you sharing with me all the delicate information and importa

Figure 1: Fraudulent Email the Examinee Claims to be from Webmail@nbme.org

Now, here is an example of an email I’ve crafted and sent to myself using the python programming language and a locally hosted mail server on my computer.

¹ Email spoofing is the fabrication of an email header in the hopes of duping the recipient into thinking the email originated from someone or somewhere other than the intended source.

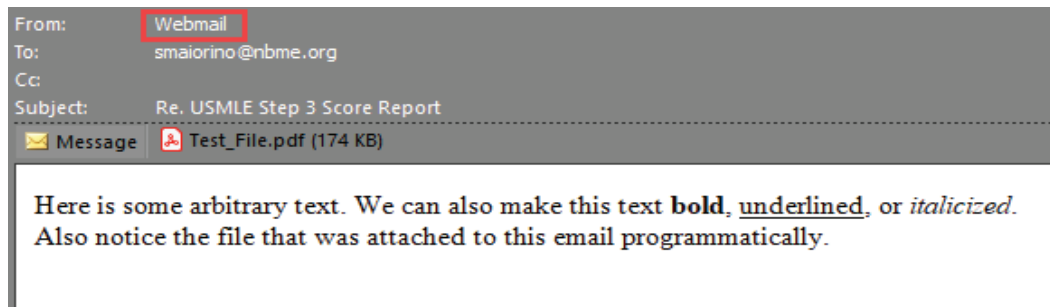


Figure 2: Proof that an Email can be auto-generated with a fraudulent sender address

Note that I do not have access to the Webmail@nbme.org inbox. It is evident that the examinee could have easily crafted their own fraudulent email using similar methods.

2. Email Header Analysis

Additional evidence from the email headers shows the email did not get passed through any relay servers. If the email was actually sent from Webmail@nbme.org, the headers would have been populated differently.

Below is a screenshot showing the headers of the fraudulent email.

Headers Found

Header Name	Header Value
MIME-Version	1.0
Date	Mon, 8 Jul 2019 16:26:59 -0400
Message-ID	<CAJD84yhy6pAb8zFFQdp-H1Sj36L8w+n1fvoMBzHzaFJf6PUD-A@mail.gmail.com>
Subject	Re. USMLE Step 3 Score Report
From	Nbme <webmail@nbme.org>
To	Paul Bowary <paul_bowary@brown.edu>
Content-Type	multipart/mixed; boundary="0000000000000718cbc05a012458b"

Figure 3: Headers from the Fraudulent Email

The next image shows what the header information should look like when a legitimate email from Webmail@nbme.org is sent out via Salesforce. NBME has been sending emails from the Webmail@nbme.org address since November 2017 and we can clearly see the initial sender originates from the Salesforce domain in these legitimate email headers within the highlighted section in Figure 4.

Headers Found

Header Name	Header Value
Authentication-Results	spf=softfail (sender IP is 65.207.85.16) smtp.mailfrom=v0pmtnn3u42lpn0n.mxsyxwx.46-pfbg
Received-SPF	SoftFail (protection.outlook.com: domain of transitioning v0pmtnn3u42lpn0n.mxsyxwx.46-pfbg
Authentication-Results-Original	ppops.net; spf=pass smtp.mailfrom=webmail@nbme.org__0-4gmfwfwl9qs69h.0a55le016n6xw
Date	Fri, 3 Apr 2020 14:40:50 +0000
From	"webmail@nbme.org" <webmail@nbme.org>
To	"smaiorino@nbme.org" <smaiorino@nbme.org>
Message-ID	<g1hUh00Q87VG200tM_1k07gSyWj-v
Subject	NBME Customer Support - Case #00404548 [ref_00D46pfBg_5004A1uisiU:ref]
Content-Type	multipart/alternative; boundary="-----_Part_3412_415347963.1585924850337"
X-SFDC-LK	00D46000000pfBg
X-SFDC-User	0054600000113DM
X-Sender	postmaster@salesforce.com
X-SFDCOrgRelay	00D46000000pfBg

Figure 4: Headers from a Legitimate Email Sent from Webmail@nbme.org via Salesforce

Notice the ample amount of header information compared to Figure 3. Much more information persists in these headers, but this is enough to show the difference between both emails. Figure 3 does not contain any header information that matches Figure 4, meaning the examinee's email could not have come from the NBME Salesforce application.

The next page shows an example of what the headers look like when sending an email from Outlook while signed into the NBME domain. The account password along with DUO two-factor authentication is required to send emails this way. I sent an email to my personal g-mail account as an example.

Headers Found

Header Name	Header Value
Delivered-To	[REDACTED]
X-Google-Smtp-Source	APiQypLyF8xeTIXSbiE+R1o7JOWBHFQ7j8pZSsEH0ATrdIcbkx2RXZa3nNe9bMF6yXuqbvvtb81C
X-Received	by 2002:a25:23c5:: with SMTP id j188mr7331813ybj.308.1585846212169; Thu, 02 Apr 2020 09:50:12 -0700 (PDT)
Return-Path	<SMAiorino@nbme.org>
Received-SPF	pass (google.com: domain of smaiorino@nbme.org designates 148.163.158.80 as permitted sender) client-ip=148.163.158.80; envelope-from=smaiorino@nbme.org; helo=mail-nbme-org.googleusercontent.com; ip=148.163.158.80; recipient-domain=nbme.org; smtp-id=j188mr7331813ybj.308.1585846212169; spf=pass (google.com: domain of smaiorino@nbme.org designates 148.163.158.80 as permitted sender); dkim=neutral (body hash did not verify); header.i=@nbmeorg.onmicrosoft.com; header.s=selector1-nbmeorg-onmicrosoft-com; smtp.mailfrom=SMAiorino@nbme.org
ARC-Seal	i=1; a=rsa-sha256; s=arcselector9901; d=microsoft.com; cv=none; b=AVwNZPCVo7dzWrWJ7MY4dyJqBjbk9JDyhDX5k1rYKsej1UIFFCCGv3CxA37/9yaDrjp9alk4a1utLCV2jkXhJ2BozoiqKF2luaw1MUsm4J81yu6ZSYbMugwlGACVJM/CKLxabMV4
ARC-Message-Signature	i=1; a=rsa-sha256; c=relaxed/relaxed; d=microsoft.com; s=arcselector9901; h=From:Date:Subject:Message-ID:Content-Type:LcjhUSk/EJEbmDEYL6ryca9xglRvCSIO4tJUXXK3zYlvHsU2Ek1hqs9V3Yn5L+7E1DoQY9pab1yiLp8xqlCiKYhQORzQOj1BzQ7y1nr6iotLzS6KSt+ofBwOwSvB82T6MvlQjptBZR/SjiABQs1neVDIGnejv7b8tbe4xURH8ygg==
ARC-Authentication-Results	i=1; mx.microsoft.com 1; spf=pass smtp.mailfrom=nbme.org; dmarc=pass action=none header.from=nbme.org; dkim=pass
DKIM-Signature	v=1; a=rsa-sha256; c=relaxed/relaxed; d=nbmeorg.onmicrosoft.com; s=selector1-nbmeorg-onmicrosoft-com; h=From:Date:Subject:Message-ID:Content-Type:LcjhUSk/EJEbmDEYL6ryca9xglRvCSIO4tJUXXK3zYlvHsU2Ek1hqs9V3Yn5L+7E1DoQY9pab1yiLp8xqlCiKYhQORzQOj1BzQ7y1nr6iotLzS6KSt+ofBwOwSvB82T6MvlQjptBZR/SjiABQs1neVDIGnejv7b8tbe4xURH8ygg==
From	Steven Maiorino <SMAiorino@nbme.org>
To	[REDACTED]
Subject	Test Email
Thread-Topic	Test Email
Thread-Index	AdYJDsEM27R+GqbqT+mhYGT92Dkjqq==
Date	Thu, 2 Apr 2020 16:50:08 +0000
Message-ID	<DM6PR15MB278094A7480775B6FA89E965C9C60@DM6PR15MB2780.namprd15.prod.outlook.com>
Accept-Language	en-US
Content-Language	en-US
X-MS-Has-Attach	yes

Figure 5: Headers from an Email sent from the actual NBME Domain

Figure 5 shows how different the header information looks when sending it through the NBME exchange server rather than passing it through a local mail server. We can clearly see the examinee could not have sent this email while logged in as the Webmail@nbme.org account since the headers (as seen in Figure 3) do not contain nearly as much information as Figure 5.

Additionally, here are the headers from the programmatically crafted email that I sent to myself using a local mail server (Figure 2). We can see they closely resemble the headers in Figure 3, enhancing the probability that this method, or something similar, was leveraged by the examinee to send the fraudulent email.

Headers Found

Header Name	Header Value
Content-Type	multipart/mixed; boundary="=====6297180200948102700=="
MIME-Version	1.0
From	Nbme <webmail@nbme.org>
To	smaiorino@nbme.org
Subject	Re. USMLE Step 3 Score Report

Figure 6: Headers of the Proof of Concept Programmatically Generated Email

3. Salesforce Emails

As a closing remark, all emails Webmail@nbme.org have been sent via NBME Salesforce instance since November 2017. NBME reached out to several of their Salesforce consultants (Matt Ankerbrandt and Arielle Boylan) for them to obtain the email sent to the examinee, Paul Bowary, but no history of this email exists in Salesforce. This email would have been in the NBME Salesforce instance if it was actually sent, which enhances the probability of the examinee forging this email themselves.

EXHIBIT N

From: USMLESec
Sent: Wednesday, October 21, 2020 11:48 AM
To: DGrieco@grieco-law.com
Cc: 'paul_bowary@brown.edu'
Subject: RE: ATTENTION AMY BUONO re: Dr. Paul Bowary (08992844)
Attachments: USMLE Policies and Procedures re Irregular Behavior.pdf

Dr. Bowary, thank you for your confirmation that we may work with Mr. Grieco regarding your appeal.

Mr. Grieco, thank you for your email confirming your intent to appeal the Committee for Individualized Review (CIR) decision regarding Dr. Bowary.

CIR decision appeals go before the USMLE Composite Committee. The next meeting of the USMLE Composite Committee is **February 10, 2021**. Personal appearances are not permitted before the Composite Committee. The decision of the Composite Committee is final.

Please send your appeal letter and any other documents you wish the Committee to review in reference to your appeal to USMLESec@nbme.org by no later than **January 1, 2021**.

The USMLE Composite Committee will be presented with all the information that was made available to the CIR, details of the case decision, and the appeal letter submitted by you. The appeal procedure is discussed in Section B. (8) of the attached document, *USMLE Policies and Procedures re: Irregular Behavior*.

Please let me know if you have any other questions.

Sincerely,
Amber

From: Paul Bowary <paul_bowary@brown.edu>
Sent: Wednesday, October 21, 2020 11:14 AM
To: USMLESec <USMLESec@nbme.org>; dgrieco@grieco-law.com
Subject: Re: ATTENTION AMY BUONO re: Dr. Paul Bowary (08992844)

To whom it may concern,

This is to confirm that Mr Dennis Grieco is my current attorney and I permit you to communicate with him regarding and all details of my case with USMLE,

Thank you.
Paul Bowary

 **Paul Bowary**

Paul Bowary, M.D.

Staff Psychiatrist
Patient Assessment Services
Butler Hospital/ Brown University, DPHB

Pgr: 401-582-5437

On October 21, 2020 at 15:10 GMT, USMLESec <usmlesec@nbme.org> wrote:

Dear Mr. Grieco:

Thank you for your email. We require a release from Dr. Bowary in order to work with you regarding his case.

An email from Dr. Bowary's email account of record will suffice. The email should confirm you are his attorney and permit us to communicate with you regarding any and all details of the case.

You may send it to our office at USMLESec@nbme.org.

Sincerely,

Amber
Program Manager
Office of the USMLE Secretariat

T +1 215-590-9873
E usmlesec@nbme.org
W usmle.org



3750 Market Street, Philadelphia PA 19104, USA

From: Dennis Grieco II <DGrieco@grieco-law.com>
Sent: Wednesday, October 21, 2020 10:04 AM
To: USMLESec <USMLESec@nbme.org>
Subject: ATTENTION AMY BUONO re: Dr. Paul Bowary
Importance: High

Dear Ms. Buono,

I have recently been retained by Dr. Paul Bowery to address the decision of the USMLE Committee for Individualized Review ("CIR"), as described in your letter to Dr. Bowary dated September 23, 2020. I will be shortly submitting a request for the CIR to reconsider that decision and an appeal of that decision to the USMLE Composite Committee. Should that request and that appeal be submitted to your attention? If not, can you please provide me with the name and contact information as to whom that request and appeal should be submitted?

Thank you kindly for your attention and assistance. I look forward to your response.

Sincerely,

Dennis T. Grieco II, Esq.
GRIECO LAW
70 Jefferson Boulevard
Suite 301
Warwick, RI 02888
(401) 432-7400 Phone

(401) 461-4107 Fax

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***United States Medical Licensing Examination (USMLE)
Policies and Procedures Regarding Irregular Behavior***

Introduction

The following policies and procedures regarding irregular behavior are intended to protect the integrity of the USMLE examination program. If the irregular behavior creates a good faith basis for questioning the validity of an examinee's scores, the policies and procedures described in another document, entitled *USMLE Policies and Procedures Regarding the Validity of Passing Level Scores*, may also be applicable.

A. Policies

1. *Irregular behavior* includes all actions or attempted actions on the part of applicants, examinees, potential applicants, or others that could subvert the examination process. Examples of irregular behavior include, but are not limited to: failing to comply with any USMLE policy, procedure, and/or rule; seeking and/or obtaining unauthorized access to examination materials; providing false information; impersonating an examinee or having someone else test in one's place; giving assistance to or receiving assistance from another individual in answering test items; possessing unauthorized items, equipment or materials during an examination; altering or misrepresenting examination scores; engaging in disruptive or unprofessional behavior at a test center; theft of examination materials; unauthorized reproduction by any means and/or dissemination of examination content or other copyrighted materials; posting or discussing examination content on any website, or asking others to do so; and taking any other action that could give an inappropriate advantage to individuals who might be taking the examination.
2. If the USMLE Committee for Individualized Review ("CIR") determines that irregular behavior has occurred, an annotation to that effect will be entered in the USMLE record of the examinee, and this annotation will appear on applicable score reports (if scores are reported) and on transcripts for that examinee. Information regarding the decision of the CIR and the basis for such decision may also be provided to legitimately interested entities, including the Federation of State Medical Boards' Physician Data Center.
3. If the CIR determines, in its discretion, that an individual engaged in irregular behavior that is sufficiently serious to warrant such action, the individual may be barred from future administrations of USMLE or subjected to special procedures for taking future USMLE examinations, in addition to being subject to the actions described in Paragraph A.2, above.

4. A CIR finding of irregular behavior may be appealed by the affected individual to the USMLE Composite Committee in accordance with Paragraph B.8, below. The pendency of an appeal, however, will not stay or delay implementation of the CIR's decision.

B. Procedures

1. After acquiring information suggesting irregular behavior on the part of an individual from third-party reports, statistical analysis, fact investigation, or otherwise, staff will assess whether there is sufficient evidence to conclude that irregular behavior may have occurred. Staff will conduct a follow-up investigation to gather additional information when necessary.
2. If the staff analysis and/or follow-up investigation will not be concluded until after the typical period for the reporting of scores, the examinee and the entity to which scores would normally be reported will be notified that the reporting of the scores in question is being delayed pending further review.
3. If, at the conclusion of its investigation and analysis, staff finds that there is a reasonable basis to conclude that an individual has engaged in irregular behavior, the matter will be referred to the CIR. If the individual is an examinee, his/her scores will be withheld if not already released, and the individual might not be permitted to sit for subsequent examinations, nor will Step applications be processed, pending a decision by the CIR.
4. If a potential irregular behavior incident is referred to the CIR, the individual involved will be notified using the individual's last known email and postal address and provided with a copy of the applicable USMLE policies and procedures. The individual will be advised of the information which initiated the investigation and relevant findings of the investigation. The individual will be given an opportunity to provide an explanation for the facts described in the findings and to present other relevant information. The individual may request the opportunity to appear personally before the CIR. If the individual involved appears personally before the CIR, the oral presentation will be made under oath and a stenographic or audio recording may be made at the election of the CIR.
5. The CIR will consider all available pertinent information in deciding whether an individual engaged in irregular behavior, including the record assembled by staff, statistical analyses employed by staff (if any), and any explanation or other information that the individual may provide. If the CIR determines that there is a good faith basis for concluding that irregular behavior has occurred, the affected individual will be notified and informed of the right to appeal the CIR decision in accordance with Paragraph B.8, below. Regardless of whether an appeal is taken, an annotation indicating the nature of the irregular behavior will be entered immediately in the individual's USMLE record. This annotation will appear on the applicable score report (if scores are released) and on transcripts for the

individual. At the discretion of the CIR, information regarding a CIR finding of irregular behavior may also be provided to legitimately interested entities, including but not limited to the entity that certified the individual's eligibility for the examination in question, a medical education or training program in which the individual has participated or is participating at the time of the CIR's decision, and/or the FSMB's Physician Data Center. All medical licensing authorities that have received a score report or transcript for this individual in the past will receive an updated transcript and/or score report which reflects the CIR's decision.

6. If suspected irregular behavior raises concerns about the validity of a USMLE score, staff and/or the CIR may elect to review the matter and to proceed under these policies and procedures and/or under the *USMLE Policies and Procedures Regarding the Validity of Passing Level Scores*, as staff and/or the CIR deem appropriate and without requiring staff and/or the CIR to conduct separate proceedings.
7. In the event of irregular behavior that the CIR deems, in its discretion, to be sufficiently serious to warrant such action, the CIR may bar the individual from future examinations and/or implement special procedures for administering future examinations to the affected individual. If an individual is barred from future examinations, the CIR may allow for testing after a specified minimum time, upon petition of a medical licensing authority.
8. A decision of the CIR may be appealed to the USMLE Composite Committee if the individual involved has a reasonable basis to believe the CIR did not act in compliance with applicable USMLE policies and/or procedures or that the CIR's decision was clearly contrary to the weight of the evidence before it. The appeal must be received within 30 days of the date on which the notice of the CIR's decision was mailed to the individual. If the score for the examinee and CIR findings are reported during the pendency of the appeal, the recipient of the report will be informed that the individual is appealing the decision. The Composite Committee will decide appeals based upon a written record, including all information available to the CIR, a transcript of the recording made during the individual's appearance before the CIR (if there was such an appearance and it was transcribed), and the basis for appeal set forth by the individual. Neither the individual who is the subject of a CIR decision nor anyone representing that individual shall be entitled to appear in person before the Composite Committee. If the Composite Committee determines that the CIR did not act in compliance with applicable USMLE policies and procedures and/or that the decision of the CIR was clearly contrary to the weight of the evidence, the Composite Committee may reverse the decision of the CIR or remand the matter to the CIR or staff for further consideration. If the Composite Committee reverses the decision of the CIR to annotate the individual's USMLE record, all entities that received USMLE transcripts or score reports showing irregular behavior will be notified of the decision of the Composite Committee and provided with an updated transcript and/or score report. Otherwise, the determination of the CIR will stand.

EXHIBIT O



GRIECO LAW

VIA EMAIL: USMLESec@NBME.org
AND U.S. PRIORITY/OVERNIGHT

October 22, 2020

Ms. Amy Buono
Director
Office of the USMLE Secretariat
3750 Market Street
Philadelphia, PA 19104

Committee for Individualized Review
USMLE Secretariat
3750 Market Street
Philadelphia, PA 19104

Composite Committee
USMLE Secretariat
3750 Market Street
Philadelphia, PA 19104

Re: Dr. Paul Bowary

Dear Ms. Buono and members of the above-referenced Committees:

I have been recently retained to represent Dr. Paul Bowary. I write with respect to the enclosed September 23, 2020 letter from Ms. Buono to Dr. Bowary (the "9/23/20 Letter"), regarding the decision of the Committee for Individualized Review ("CIR"). On behalf of Dr. Bowary, I respectfully request that the CIR reconsider that decision after Dr. Bowary has had an opportunity to submit additional information. In the alternative, this letter will serve as Dr. Bowary's appeal of the CIR's decision referenced in the 9/23/20 Letter. While I intend to submit important and substantive information for your consideration in the near future, I believe the CIR's reconsideration of its decision or the reversal or remand of that decision by the Composite Committee is necessitated by USMLE policy and warranted by fundamental fairness.

Dr. Bowary fully recognizes the significance and gravity of the CIR's findings and decision as described in the 9/23/20 Letter and by no means suggests that they should be taken lightly. However, unfortunately, Dr. Bowary, and apparently the prior attorney on which he relied, did not recognize the extent of the issues and information confronting him and as a result, did not address the significant information and investigation upon which the CIR based its findings and decision. This was due to the USMLE's failure to advise Dr. Bowary and his prior counsel of the relevant

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Re: Dr. Paul Bowary

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findings of its investigation, as required by USMLE policy, and by his prior attorney's lack of familiarity with the process, issues and potential results. For these reasons, as detailed further below, Dr. Bowary should be afforded a reasonable opportunity to address and respond to those findings and provide significant, additional information, accurately explaining the circumstances confronting the CIR and demonstrating he was not guilty of any improper conduct or irregular behavior.

As indicated in the enclosed April 27, 2020 letter from Ms. Buono to Dr. Bowary (the "4/27/20 Letter") and the 9/23/20 Letter, the USMLE's investigation, the CIR's proceedings and decision, and Dr. Bowary's appeal from that decision are all governed by USMLE's Policies and Procedures Regarding Irregular Behavior (the "USMLE Policy"). Paragraph B.4 of the USMLE Policy provides:

If a potential irregular behavior incident is referred to the CIR, the individual involved will be notified using the individual's last known email and postal address and provided with a copy of the applicable USMLE policies and procedures. The individual will be advised of the information which initiated the investigation and relevant findings of the investigation. The individual will be given an opportunity to provide an explanation for the facts described in the findings and to present other relevant information. The individual may request the opportunity to appear personally before the CIR. If the individual involved appears personally before the CIR, the oral presentation will be made under oath and a stenographic or audio recording may be made at the election of the CIR.

(USMLE Policy ¶ B.4 (April 2018) (emphasis added).)

Certainly and sensibly, the USMLE policy requires the USMLE to disclose the "relevant findings of investigation" prior to the individual's appearance before the CIR, so that he or she would be provided the required "opportunity to provide an explanation of the facts described in the findings." (USMLE Policy ¶ B.4 (April 2018).) Unfortunately, that did not occur in this case.

A simple comparison of the information in the 9/23/20 Letter that the CIR expressly states it reviewed and upon which it determined Dr. Bowary engaged in irregular behavior to the information disclosed to Dr. Bowary in the 4/27/20 Letter makes irrefutably clear that the most significant and substantive information forming the basis for the CIR's findings and decision was not disclosed to Dr. Bowary, so that he would have the required "opportunity to provide an explanation for the facts described in the findings" of the USMLE's investigation and to identify and "present other relevant information." (USMLE Policy ¶ B.4 (April 2018).)

The 4/27/20 Letter did apprise Dr. Bowary of the "information which initiated the investigation," as required by the USMLE Policy. That letter contains eight bulleted paragraphs which delineate the information which initiated the investigation. Specifically, those paragraphs

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Re: Dr. Paul Bowary

October 22, 2020

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- describe the content of emails Dr. Bowary submitted to the Federation of State Medical Boards (the “FSMB”), the National Board of Medical Examiners (the “NBME”) and the Rhode Island Department of Health (the “RIDOH”) on March 5, 2020;
- describe the contents of emails Dr. Bowary submitted to FSMB on October 30, 2018 and July 31, 2019;
- provide a chronology of Dr. Bowary’s registration for, sitting for and the results of Step 3 examinations; and
- state that no record of Dr. Bowary requesting a score recheck for any Step 3 examination could be found.

However, a review of the bulleted paragraphs in the 9/23/20 Letter, setting forth the specific “information” which the CIR expressly stated it “reviewed” and carefully considered in deliberating and ultimately, “determine[ing] that [Dr. Bowary] engaged in irregular behavior” (9/23/20 Letter at 2-4) makes clear that the USMLE generated “relevant findings of [its] investigation” (USMLE Policy ¶ B.4 (April 2018) which formed the basis for the CIR’s findings and decision, but which were never disclosed to Dr. Bowary. The first seven of those bulleted paragraphs and the first sentence of the eighth paragraph in the 9/23/20 Letter are identical to the bulleted paragraphs set forth in the 4/27/20 Letter, as if they were copied and pasted from the 4/27/20 letter. (Compare the 9/23/20 Letter at 2-3 to the 4/27/20 letter at 1-2.) However, the 9/23/20 Letter goes on to set forth the following, additional bulleted paragraphs, containing the results of the NBME’s IT staff’s investigation of the format and properties of the Score Report and the format and data from the headers of the emails Dr. Bowary submitted to NBME, FSMB and USMLE:

- NBME staff analyzed the falsified score reports attached to the March 5 and 6, 2020 emails sent to FSMB, NBME, the Office of the USMLE Secretariat and the Rhode Island Department of Health and noted inconsistencies from an authentic score report, including obvious changes to the pass/fail outcome and the numeric score. The falsified score reports were in various formats differing from the format of an authentic score report— including jpeg files and a scanned document converted to a pdf.
- Staff compared the falsified pdf score report sent to the Office of the USMLE Secretariat on March 6, 2020 to the authentic report and noted the following: the authentic score report from your April 8, 2018 administration is a pdf file created on April 29, 2018 while the falsified score report is a PDF file created on March 6, 2020 using a program called “JPL Ghostscript,” a different program than the one used to generate authentic score reports.
- NBME staff analyzed the email allegedly sent from webmail@nbme.org in July 2019 and noted inconsistencies from an authentic email which would be sent from this email address, including information contained in the email headers. Additionally, no record of this email was found in NBME’s IT records.

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Re: Dr. Paul Bowary
October 22, 2020
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Inconsistencies within the email itself also indicated that it is a fabrication; for example, the email was not signed by an NBME employee and the name of the subunit listed in the email signature – Examinee Support Services – was changed to Customer Operations Management in 2017.

(9/23/20 Letter at 3.)

Clearly, these findings of the NBME's IT staff's investigation were a very important part of the CIR's "deliberations" and "determin[ation] that [Dr. Bowary] engaged in irregular behavior." (9/23/20 Letter at 2, 4.) Just as clearly, those findings of the NBME's IT staff's investigation were not disclosed in the 4/27/20 Letter or in any other manner to Dr. Bowary as required by the USMLE Policy, so that he would "be given an opportunity to provide an explanation for the facts described in the findings [of the investigation]" and so that his prior attorney and him could determine what other information may be relevant. (USMLE Policy ¶ B.4 (April 2018).) Had these clearly "relevant findings of the investigation" been disclosed to Dr. Bowary and his counsel, they would have had the opportunity to perform the type of investigation I have commenced and thereby, permit Dr. Bowary to produce and explain to the CIR the information my investigation has already produced and will continue to produce that explains the inaccuracy of the findings of the NBME's IT staff's investigation, so that the CIR is afforded the opportunity to review all of the relevant information and make an accurate and equitable decision.

My request and explanation above are not made lightly, nor is it simply an attempt at legal maneuvering. I have represented committees like the CIR at healthcare institutions and well understand their deliberative process and resulting perspective that any decision they ultimately come to is well-founded. However, an absolute requirement of such a committee's process in order for that resulting perspective to be valid is that the process afforded all parties a fair and equal opportunity to address the relevant issues and present relevant information (as required by the USMLE Policy). Otherwise, the committee's deliberative process and resulting decision cannot be considered accurate and reliable, because neither the process nor the decision addressed all of the relevant information.

I am confident that the USMLE intends the CIR's process and resulting decisions to comport with these requirements, so that they are fair and ultimately accurate. Unfortunately, due to the failure to disclose the findings of the NBME's IT staff's investigation and Dr. Bowary's prior counsel's resulting failure to seek out and address such information, neither the CIR process nor its resulting decision in this case can reasonably be held up as fair and accurate.

It is important to recognize that Dr. Bowary is in the United States on an H1 visa. Thus, it is imperative that he be provided a full and fair opportunity to resolve his qualifications to practice medicine, as otherwise he may be subject to deportation. That is a result that certainly cannot be countenanced by anyone involved in the USMLE process and as a result, clearly warrants reconsideration by the CIR to ensure for all involved that the determination of Dr. Bowary's

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Re: Dr. Paul Bowary

October 22, 2020

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qualifications to practice medicine has been made only after a complete review of all relevant information.

As I indicated, even my preliminary investigation into this matter has produced important and relevant information that I will share shortly. In the meantime, I would also point out that a common sense view of the underpinnings of and conclusions mandated by the CIR's findings show them to be illogical and unlikely, no doubt due to the fact that the CIR was not afforded the opportunity to review and consider all relevant information.

Dr. Bowary, like every resident planning to take the USMLE Step 3 examination, inherently knew prior to taking that exam that its results would be reported by the testing agency, through the Federation Credentials Verification Service ("FCVS"), an arm of the FSMB, to the RIDOH when he applied for licensure. Thus, Dr. Bowary was completely aware that no information from him would be provided to the RIDOH, concerning his USMLE examination results.

The only, yet wholly illogical, conclusion from the CIR's findings is that after receiving a failing score for the Step 3 examination in late April or early May, 2018, taking and failing the examination again in December, 2018 and knowing those failing grades would be reported to the RIDOH when he applied for his medical license, Dr. Bowary forewent retaking the examination again and took no other action to address his failing scores on the Step 3 examination until early March, 2020 when he fraudulently and sinisterly created an email dated July 8, 2019, purportedly from NBME, and created and attached a passing USMLE Step 3 Score Report, in order to produce it, for the first time, to the NBME, FSMB, USMLE and RIDOH, assumedly so he could fraudulently try to convince all involved that he passed the Step 3 examination, despite knowing that only his failing scores were recorded and reported to the RIDOH. Such a scheme would be nonsensical and utterly improbable, as every resident and any thinking person would know that there are no circumstances under which it could in any way be successful.

Like every other resident, Dr. Bowary knew that his Step 3 exam results would be communicated to the RIDOH by third parties, over which he had no control. Thus, it would literally make no sense to fraudulently create contrary information that he passed the examination that he knew would not be reported to the RIDOH. Clearly, no one would commit the level of fraud suggested by the CIR's findings and thereby place their entire professional career at terminal risk when they knew that the fraudulent information would not be received by the RIDOH in any event. Unfortunately, neither these plain facts nor any information or evidence proving the authenticity of the July 8, 2019 NBME email and attached USMLE Score Report was developed and submitted to the CIR by Dr. Bowary's former attorney.

Further, if anyone concocted a plan to fraudulently demonstrate a passing score on the Step 3 examination when they had otherwise failed, it would seem clear that they would have to undertake some effort to have that fraudulent passing score reported through the known, official channel to that licensing authority in the first instance. No one would sit idly for almost two years

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Re: Dr. Paul Bowary

October 22, 2020

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after receiving a failing score they knew would be reported through the FCVS to the RIDOH and only then create and produce fraudulent evidence of a passing score to the very entities which he or she knew would reject that fraudulent passing score, because they had not generated it in the first instance. To the contrary, it would seem clear that Dr. Bowary's provision of the July 8, 2019 NBME and attached Step 3 Score Report to the NBME, FSMB and USMLE for the first time in March 2020, after he submitted his application for licensure and knew his Step 3 score would be reported by FCVS, evidences the fact that he actually received that email and rescored passing score in July, 2019 and naturally understood that it would be reported to the RIDOH by FCVS through the standard process.

For all of these reasons, on behalf of Dr. Bowary, I respectfully request in the first instance that the CIR reconsider this matter, so that it can make a full and accurate decision based upon all of the relevant information, or alternatively, that the Composite Committee reverse and remand this matter to the CIR for the very same purpose. I will submit further, detailed information shortly. However, please feel free to contact me with any questions or issues.

In the meantime, I would request that you provide me with copies of the following documents, data and/or materials, regardless of the medium in which they were generated or are kept, e.g., paper, email, electronic data, etc.:

1. all documents, correspondence, data, materials or information of any kind reviewed by the CIR in relation to Dr. Bowary;
2. any audio and video recordings and transcripts of any CIR meeting or other action, function or deliberation of any kind, relating to Dr. Bowary, including but not limited to the CIR meeting at which he made a personal appearance in August, 2020;
3. any annotation entered in the USMLE record of Dr. Bowary and its appearance on any score reports or transcripts and any information provided to other entities with respect to Dr. Bowary, as stated in paragraph A.2 and B.5 of the USMLE's Policies and Procedures Regarding Irregular Behavior; and
4. copies of the USMLE's Policies and Procedures Regarding Irregular Behavior and its Policies and Procedures Regarding the Validity of Passing Level Scores in effect from January 1, 2018 through the present.

Thank you kindly for your attention and consideration. I look forward to your response.

Sincerely,



Dennis T. Grieco II

DTG/kmw
Enclosures



Via Email
Personal and Confidential

September 23, 2020

Paul Bowary
 20 Mission Place
 Providence, RI 02908

USMLE ID#: 0-899-284-4

Email: paul_bowary@brown.edu

Dear Dr. Bowary:

I am writing to inform you that the USMLE Committee for Individualized Review (“CIR”) has completed its review of the allegation that you engaged in irregular behavior by altering or misrepresenting examination scores.

In advance of the review, the CIR members were provided with copies of the following materials: (a) my letter to you dated April 27, 2020; (b) an email from your email address on record to the Federation of State Medical Boards (FSMB), which included three JPEG attachments: 1) a falsified USMLE Step 3 score report, bearing your name and USMLE identification number, an exam date of April 8, 2018, with a passing score of 199; 2) a screenshot of a July 2019 email you allegedly received from staff at NBME informing you of a change to your Step 3 score; and 3) payment summaries for a refund of Step 3 examination fees; (c) an email to NBME as a follow up to your March 5, 2020 inquiry to the FSMB, which included the attachments you previously sent to the FSMB; (d) a falsified USMLE Step 3 score report scanned to PDF format sent to FSMB on March 6, 2020, bearing your name and USMLE identification number, an exam date of April 8, 2018, with a passing score of 199; (e) a falsified USMLE Step 3 score report in PDF format created on March 6, 2020 sent to the Office of the USMLE Secretariat also on March 6, 2020, bearing your name and USMLE identification number, an exam date of April 8, 2018, with a passing score of 199; (f) an analysis of the falsified score report conducted by NBME staff; (g) an analysis of the properties of the email allegedly sent to you in July 2019 from webmail@nbme.org conducted by NBME staff; (h) emails provided by FSMB confirming you requested Step 3 examination fee refunds due to extenuating circumstances; (i) correspondence between you and staff in the Office of the USMLE Secretariat; (j) correspondence between you, the Residency Training Director for the Brown University General Psychiatry Residency Program, and staff in the Office of the USMLE Secretariat; (k) correspondence between you, staff at the Rhode Island Department of Health (RIDOH) and staff in the Office of the USMLE Secretariat; (l) your examination history and biographical information; and (m) your written personal statement to the CIR, submitted on your behalf by your attorney, Mr. Edward R. McCormick, III.

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 Philadelphia, PA 19104
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 Webmail@nbme.org
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In its deliberations, the Committee reviewed the foregoing information and noted the following:

- On March 5, 2020, you sent an email to FSMB inquiring about your USMLE Step 3 score, in relation to your application for a medical license in Rhode Island. You stated that you were informed via email from webmail@nbme.org in July 2019 that NBME had rechecked your Step 3 score and that you had passed your April 8, 2018 administration, which was previously reported as a fail. You attached a USMLE Step 3 score report to the email, bearing your name and USMLE identification number, an exam date of April 8, 2018, and a passing score of 199.
- In your email to FSMB, you attached a screenshot of the July 2019 email you allegedly received from staff at NBME informing you of the change in your Step 3 score, as well as payment summaries for a refund of Step 3 examination fees. You noted that the refund was for a subsequent Step 3 application that was “voided” because of the change from a fail to a pass on your April 8, 2018 Step 3 administration.
- On March 5, 2020, you sent an email to NBME as a follow up to your March 5, 2020 inquiry to the FSMB and included the attachments you previously sent to the FSMB. On the same day, you also sent this email to RIDOH, including the attachments.
- NBME IT staff confirmed there is no record of sending an email from webmail@nbme.org on July 8, 2019 to “paul_bowary@brown.edu.”
- A review of your USMLE record shows that FSMB issued you refunds for two Step 3 registration payments, at your request, via emails dated October 30, 2018 and July 31, 2019. You cited personal extenuating circumstances as the reason for the refund in both emails.
- A review of your USMLE examination history shows that you sat for Step 3 on April 8, 2018 and received a failing score of 192. You registered for Step 3 again on May 2, 2018 and chose an eligibility period of May 1, 2018 through July 31, 2018. You submitted a request on July 16, 2018 to extend your eligibility through October 31, 2018. On October 30, 2018, you emailed FSMB and requested that your application be terminated and your registration fees be refunded.
- You sat for Step 3 again on December 28, 2018 and received a failing score of 178. You reapplied for Step 3 on January 23, 2019 and selected an eligibility period of February 1, 2019 through April 30, 2019. You submitted a request on April 22, 2019 to extend your eligibility through July 31, 2019. You did not sit for the Step examination during this eligibility period and requested a refund for the registration fees via email on July 31, 2019. FSMB issued the refund in August 2019, which is

represented on the payment summary you attached to your March 5, 2020 emails to FSMB and NBME.

- NBME and FSMB confirmed that there is no record of you requesting a score recheck for your April 8, 2018 Step 3 examination. Your explanation of how you obtained a score recheck did not match NBME or FSMB protocol for the score recheck process. It is also published in the USMLE *Bulletin of Information* that the score recheck process has never resulted in a score change.
- NBME staff analyzed the falsified score reports attached to the March 5 and 6, 2020 emails sent to FSMB, NBME, the Office of the USMLE Secretariat and the Rhode Island Department of Health and noted inconsistencies from an authentic score report, including obvious changes to the pass/fail outcome and the numeric score. The falsified score reports were in various formats differing from the format of an authentic score report— including jpeg files and a scanned document converted to a pdf.
- Staff compared the falsified pdf score report sent to the Office of the USMLE Secretariat on March 6, 2020 to the authentic report and noted the following: the authentic score report from your April 8, 2018 administration is a pdf file created on April 29, 2018 while the falsified score report is a PDF file created on March 6, 2020 using a program called “JPL Ghostscript,” a different program than the one used to generate authentic score reports.
- NBME staff analyzed the email allegedly sent from webmail@nbme.org in July 2019 and noted inconsistencies from an authentic email which would be sent from this email address, including information contained in the email headers. Additionally, no record of this email was found in NBME’s IT records. Inconsistencies within the email itself also indicated that it is a fabrication; for example, the email was not signed by an NBME employee and the name of the subunit listed in the email signature – Examinee Support Services – was changed to Customer Operations Management in 2017.
- In your written personal statement, you stated that the allegation that you falsified your score is insulting and false, and that you never provided any party with information that you suspected to be false.
- In your testimony before the CIR, you stated, “If you will review every email I sent, you will see that I never requested a score recheck.” You added that you were unaware a score recheck would be performed and stated that the NBME customer service representative performed the service without your request. However, in your March 5, 2020 email to FSMB, you stated that you submitted a score recheck directly to the “secretariat office” with the help of an NBME customer service representative.

- When asked by the committee how this score report alteration could have occurred, you stated that you have no theories as to how the score report was falsified or why NBME has no record of the email you allegedly received from NBME in July 2019.

Following careful consideration of all of the information available, the CIR determined that you engaged in irregular behavior. In reaching this decision, the CIR made the following findings:

- In connection with your applications for USMLE, you certified that you read and were familiar with the contents of the USMLE *Bulletin of Information* and agreed to abide by the policies and procedures described therein.
- You were advised in the USMLE *Bulletin of Information* that altering or misrepresenting examination scores constitutes irregular behavior.
- You falsified a Step 3 score report and provided it to FSMB, NBME, and RIDOH.
- You fabricated an email from NBME to support the authenticity of the falsified Step 3 score report.

In accordance with “*USMLE Policies and Procedures Regarding Irregular Behavior*,” a copy of which was included with my April 27, 2020 letter to you, your USMLE record will include an annotation showing that the CIR determined you engaged in irregular behavior. Therefore, any USMLE transcripts sent to you or any third party will include this annotation. When you submit requests for USMLE transcripts to be sent to third parties, the transcripts will be accompanied by information regarding the decision of the CIR. Such information would be based on the content of this letter and the documents referenced in it.

Further, the Committee determined that information regarding its decision will be reported to the Physician Data Center of the Federation of State Medical Boards.

As explained in paragraph B.7 of the Policies and Procedures, in the event of irregular behavior that the CIR, in its discretion, determines to be sufficiently serious to warrant such action, the CIR may decide that the examinee be barred from future examinations. The CIR found such conditions applicable in this instance and has decided to bar you for a minimum of three years from registering for or taking future administrations of USMLE for which you are otherwise eligible (i.e. until August 20, 2023 if you have maintained your eligibility continuously up until that date). Periods of ineligibility will not count toward this three-year bar. After August 20, 2023, the bar may be lifted if the USMLE program receives from a U.S. medical licensing authority, after full disclosure to it of the events that led to the imposition of the bar, a request to allow you to sit for USMLE examinations.

As explained in paragraph B.8 of same Procedures, you have the right to appeal the decision of the CIR to the USMLE Composite Committee by sending a request for appeal within 30 days of the date of this letter, if you have a reasonable basis to believe that the

CIR did not act in compliance with applicable USMLE Policies and/or Procedures or that the decision of the CIR was clearly contrary to the weight of the evidence before it.

If you have any questions about this matter, please do not hesitate to contact me at USMLESec@nbme.org.

Sincerely,

A handwritten signature in black ink that reads "Amy Buono". The signature is fluid and cursive, with the first name "Amy" and last name "Buono" clearly distinguishable.

Amy Buono
Office of the USMLE Secretariat

c: ECFMG
FSMB
NBME
Mr. Edward R. McCormick, III, Esq.
The Rhode Island Department of Health
Tracey Guthrie, M.D.



Via Email
Personal and Confidential

April 27, 2020

Paul Bowary
 20 Mission Place
 Providence, RI 02908

USMLE ID#: 0-899-284-4

Email: paul_bowary@brown.edu

Dear Dr. Bowary:

Examinees are advised in the USMLE *Bulletin of Information* that irregular behavior includes any action by applicants, examinees, potential applicants, or others that could compromise the validity, integrity, or security of the USMLE examination process. Among the examples of irregular behavior is altering or misrepresenting examination scores.

On the USMLE applications you submitted, you certified and acknowledged that you had read the USMLE *Bulletin of Information*, including information pertaining to the policies and procedures regarding Irregular Behavior and Score Validity, and agreed to abide by the policies and procedures therein.

Evidence is available, as outlined below, that you may have engaged in irregular behavior by altering your Step 3 score report and presenting it to the Federation of State Medical Boards ("FSMB"), NBME, and the Rhode Island Department of Health ("RIDOH") as authentic. Specifically:

- On March 5, 2020, you sent an email to FSMB inquiring about your USMLE Step 3 score, in relation to your application for a medical license in Rhode Island. You stated that you were informed via email from "webmail@nbme.org" in July 2019 that NBME had rechecked your Step 3 score and that you had passed your April 8, 2018 administration, which was previously reported as a fail. You attached a score report to the email, bearing your name and USMLE identification number, a Step 3 exam date of April 8, 2018, and a passing score of 199.
- In your email to FSMB, you attached a screenshot of the July 2019 email you allegedly received from staff at NBME informing you of the change in your Step 3 score, as well as payment summaries for a refund of your December 28, 2018 Step 3 examination fees. You noted that the refund was for the subsequent Step 3 application that was "voided" because of the change from a fail to a pass on your April 8, 2018 Step 3 administration.

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- On March 5, 2020, you sent an email to NBME as a follow up to your March 5, 2020 inquiry to the FSMB, and included the attachments you previously sent to the FSMB. On the same day, you also sent this email to RIDOH, including attachments.
- The NBME has no record of sending an email from “webmail@nbme.org” on July 8, 2019 to “paul_bowary@brown.edu.”
- A review of your USMLE record shows that FSMB issued you refunds for two Step 3 registration payments at your request via emails dated October 30, 2018 and July 31, 2019. You cited personal extenuating circumstances as the reason for the refund in both emails.
- A review of your USMLE examination history shows that you sat for Step 3 on April 8, 2018 and received a failing score of 192. You registered for Step 3 again on May 2, 2018 and chose an eligibility period of May 1, 2018 through July 31, 2018. You submitted a request on July 16, 2018 to extend your eligibility through October 31, 2018. On October 30, 2018, you emailed FSMB and requested that your application be terminated and your registration fees be refunded.
- You sat for Step 3 again on December 28, 2018 and received a failing score of 178. You reapplied for Step 3 on January 23, 2019 and selected an eligibility period of February 1, 2019 through April 30, 2019. You submitted a request on April 22, 2019 to extend your eligibility through July 31, 2019. You did not sit for the Step examination during this eligibility period, and requested a refund for the registration fees via email on July 31, 2019. FSMB issued the refund in August 2019, which is represented on the payment summary you attached to your March 5, 2020 emails to FSMB and NBME.
- NBME and FSMB confirmed that there is no record of you requesting a score recheck for your April 8, 2018 Step 3 examination.
- Because the score report you provided to FSMB, NBME, and RIDOH bearing your name and USMLE identification number contains false information, this matter was referred to the Office of the USMLE Secretariat.

Therefore, on the basis of this evidence, there is reason to believe you may have engaged in irregular behavior. For your reference, I am enclosing a copy of “*United States Medical Licensing Examination (USMLE) Policies and Procedures Regarding Irregular Behavior*” and “*USMLE Policies and Procedures Regarding Score Validity*.”

As explained in the Policies and Procedures regarding Irregular Behavior, all pertinent information will be reviewed by the USMLE Committee for Individualized Review. As explained in paragraph B.4, you may submit an explanation and/or any other relevant information you wish the Committee to consider when it reviews this matter. Please

forward any such information to me to arrive in my office by **June 1, 2020** for distribution to the Committee on Individualized Review before its meeting on **August 18-19, 2020**.

You also have the opportunity to appear personally before the Committee. You are not required to appear in person before the Committee, although you may elect to do so, with or without legal counsel. Your clear and concise written response to the issues raised in this letter will be given the same careful consideration by the Committee as a personal appearance. The Committee is primarily interested in hearing directly from you in your own words. Please keep this in mind if you elect to retain and appear before the Committee with counsel. If you wish to do so, please let me know by **June 1, 2020**. If you elect to appear in person, you will receive an email advising you to appear on one of two dates, either August 18 or 19, 2020. Due to potential travel restrictions related to COVID-19, it is possible that alternative arrangements regarding personal appearances will be necessary. We will update you (and your attorney, if applicable) with any changes.

Please note that your access to USMLE is suspended during the investigation.

If you have any questions about this matter, please do not hesitate to contact me at USMLESec@nbme.org.

Sincerely,



Amy Buono
Office of the USMLE Secretariat

c: ECFMG
FSMB
NBME

Attachment

EXHIBIT P-1

From: [USMLESec](#)
To: KWoodward@grieco-law.com
Subject: Dr. Bowary - Part 1 (08992844)
Attachments: [image001.png](#)
[Dr. Bowary - CIR Materials - Part 1.pdf](#)

Please reply to confirm receipt.

Thank you,

Amber
Program Manager
Office of the USMLE Secretariat

T +1 215-590-9873
E usmlesec@nbme.org
W usmle.org



3750 Market Street, Philadelphia PA 19104, USA

CIR Case Summary
August 18-20, 2020
Falsified Score

Paul Bowary (0-899-284-4)
20 Mission Place
Providence, RI 02908

Biographical/Educational History:

- ***Medical School:*** American University of Beirut Faculty of Medicine
- ***Reported Date of Graduation:*** June 2014
- ***USMLE Exam History:*** Dr. Bowary had two Step 3 applications terminated at his request – details are below in the summary.

Exam	Date	Score	Pass/Fail
Step 1	3/24/2014	210	P
Step 2 CS	6/12/2014		P
Step 2 CK	7/14/2015	215	P
Step 3	4/8/2018	192	F
Step 3	12/28/2018	178	F

Policy at Issue:

Examinees are advised in the USMLE *Bulletin of Information* that irregular behavior includes any action by applicants, examinees, potential applicants, or others when solicited by an applicant and/or examinee that could compromise the validity, integrity, or security of the USMLE examination process. Among the examples of irregular behavior is altering or misrepresenting examination scores.

Case Summary and Supporting Documents:

Evidence is available, as outlined below, that Dr. Bowary may have engaged in irregular behavior by altering his Step 3 score report and presenting it to the FSMB, NBME, and the Rhode Island Department of Health (“RIDOH”) as authentic. Specifically:

- On March 5, 2020, Dr. Bowary sent an email to FSMB inquiring about his USMLE Step 3 score, in relation to his application for a medical license in Rhode Island. Dr. Bowary stated that he was informed via email from “webmail@nbme.org” in July 2019 that NBME had rechecked his Step 3 score and that he had passed his April 8, 2018 administration, which was previously reported as a fail. Dr. Bowary attached a score report to the email, bearing his name and USMLE identification number, a Step 3 exam date of April 8, 2018, and a passing score of 199.
- In Dr. Bowary’s email to FSMB, he attached a screenshot of the July 2019 email he allegedly received from staff at NBME informing him of the change in his Step 3 score, as well as payment summaries for a refund of his December 28, 2018 Step 3 examination fees. Dr. Bowary noted that the refund was for the subsequent Step 3 application that was “voided” because of the change from a fail to a pass on his April 8, 2018 Step 3 administration.
- On March 5, 2020, Dr. Bowary sent an email to NBME as a follow up to his March 5, 2020 inquiry to the FSMB, and included the attachments he previously sent to the FSMB. On the same day, Dr. Bowary also sent this email to RIDOH, including attachments.

- NBME has no record of sending an email from “webmail@nbme.org” on July 8, 2019 to “paul_bowary@brown.edu.”
- A review of Dr. Bowary’s USMLE record shows that FSMB issued him refunds for two Step 3 registration payments at his request via emails dated October 30, 2018 and July 31, 2019. Dr. Bowary cited personal extenuating circumstances as the reason for the refund in both emails.
- A review of Dr. Bowary’s USMLE examination history shows that he sat for Step 3 on April 8, 2018 and received a failing score of 192. Dr. Bowary registered for Step 3 again on May 2, 2018 and chose an eligibility period of May 1, 2018 through July 31, 2018. Dr. Bowary submitted a request on July 16, 2018 to extend his eligibility through October 31, 2018. On October 30, 2018, Dr. Bowary emailed FSMB and requested that his application be terminated and his registration fees be refunded.
- Dr. Bowary sat for Step 3 again on December 28, 2018 and received a failing score of 178. Dr. Bowary reapplied for Step 3 on January 23, 2019 and selected an eligibility period of February 1, 2019 through April 30, 2019. Dr. Bowary submitted a request on April 22, 2019 to extend his eligibility through July 31, 2019. Dr. Bowary did not sit for the Step examination during this eligibility period, and requested a refund for the registration fees via email on July 31, 2019. FSMB issued the refund in August 2019, which is represented on the payment summary Dr. Bowary attached to his March 5, 2020 emails to FSMB and NBME.
- NBME and FSMB confirmed that there is no record of Dr. Bowary requesting a score recheck for his April 8, 2018 Step 3 examination.
- Because the score report Dr. Bowary provided to FSMB, NBME, and RIDOH bearing his name and USMLE identification number contains false information, this matter was referred to the Office of the USMLE Secretariat.

On the basis of this evidence, there is reason to believe Dr. Bowary may have engaged in irregular behavior.

Examinee Response:

An excerpt from a personal statement submitted by Mr. McCormick on behalf of Dr. Bowary follows:

“...As you are aware this was the subsequent score issued by USMLE after the original failing score. This score was issued after Mr. Bowary had contacted NBME regarding his April 2018 score. Mr. Bowary has already provided to you the email from NBME pertaining to his revised score. I have also attached an email from Examinee Support Services at NBME explaining the revised score.

It is clear from the documents, paper trail and email strings that Mr. Bowary had initiated an inquiry with NBME after receiving his initial score for the April 2018 step 3 test. That inquiry resulted in responses from them and eventually a revised score (enclosed). The allegation that somehow Mr. Bowary fraudulently created an email in support of his revised score is insulting to Mr. Bowary and false. In addition to the alleged "email", there are other reports and correspondence that support the revised score. To conclude that his score was the result of illegal behavior would require multiple

USMLE – 8/18-20/2020 CIR Meeting Paul Bowary (0-899-284-4)

fraudulent documents that fly in the face of the facts.

On Tuesday, March 17, 2020, Nicole Miller explained in detail how she would like that Dr Bowary downloads the "original format of the email" he received from NBME in July 2019 and email it to her as an attachment. Dr Bowary ended up sending the original email with passing score report as attachment exactly as Ms Miller had requested. On March 25, 2020, Ms Miller acknowledged the receipt of this email from Dr Bowary. After reviewing Dr Bowary's email conversations with Ms Miller, it appears that Ms Miller had been diligently looking for this specific email format. On every occasion where Dr Bowary had sent the email in a different format (forwarded or screenshotted versions), Ms Miller had made it a point to redirect Dr Bowary towards attaching the email in its original format. Thus, her acknowledgment of the receipt of this original email from Dr Bowary on March 25, 2020, makes your following quoted statement inaccurate, dismissive of the evidence and subsequently engaged in building a false conspiracy theory against Dr Bowary: "The NBME has no record of sending an email from webmail@nbme.org on July 8, 2019 to paul_bowary@brown.edu.

Again, as of March 25th, 2020, Ms Miller has been in possession of the clear-cut evidence that Dr Bowary did in fact receive the revised score and explanation from NBME. Any delays in closing that investigation as well as any false accusations addressed after March 25, 2020, must be expected to have serious legal consequences..."

Dr. Bowary **will be** making a WebEx personal appearance with his attorney, Mr. Edward McCormick, III.



Via Email
Personal and Confidential

April 27, 2020

Secretariat:
3750 Market Street
Philadelphia, PA 19104
(215) 590-9500
USMLESec@nbme.org
www.usmle.org

Paul Bowary
20 Mission Place
Providence, RI 02908

USMLE ID#: 0-899-284-4

Email: paul_bowary@brown.edu

Dear Dr. Bowary:

Examinees are advised in the USMLE *Bulletin of Information* that irregular behavior includes any action by applicants, examinees, potential applicants, or others that could compromise the validity, integrity, or security of the USMLE examination process. Among the examples of irregular behavior is altering or misrepresenting examination scores.

On the USMLE applications you submitted, you certified and acknowledged that you had read the USMLE *Bulletin of Information*, including information pertaining to the policies and procedures regarding Irregular Behavior and Score Validity, and agreed to abide by the policies and procedures therein.

Evidence is available, as outlined below, that you may have engaged in irregular behavior by altering your Step 3 score report and presenting it to the Federation of State Medical Boards ("FSMB"), NBME, and the Rhode Island Department of Health ("RIDOH") as authentic. Specifically:

- On March 5, 2020, you sent an email to FSMB inquiring about your USMLE Step 3 score, in relation to your application for a medical license in Rhode Island. You stated that you were informed via email from "webmail@nbme.org" in July 2019 that NBME had rechecked your Step 3 score and that you had passed your April 8, 2018 administration, which was previously reported as a fail. You attached a score report to the email, bearing your name and USMLE identification number, a Step 3 exam date of April 8, 2018, and a passing score of 199.
- In your email to FSMB, you attached a screenshot of the July 2019 email you allegedly received from staff at NBME informing you of the change in your Step 3 score, as well as payment summaries for a refund of your December 28, 2018 Step 3 examination fees. You noted that the refund was for the subsequent Step 3 application that was "voided" because of the change from a fail to a pass on your April 8, 2018 Step 3 administration.

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www.nbme.org

- On March 5, 2020, you sent an email to NBME as a follow up to your March 5, 2020 inquiry to the FSMB, and included the attachments you previously sent to the FSMB. On the same day, you also sent this email to RIDOH, including attachments.
- The NBME has no record of sending an email from “webmail@nbme.org” on July 8, 2019 to “paul_bowary@brown.edu.”
- A review of your USMLE record shows that FSMB issued you refunds for two Step 3 registration payments at your request via emails dated October 30, 2018 and July 31, 2019. You cited personal extenuating circumstances as the reason for the refund in both emails.
- A review of your USMLE examination history shows that you sat for Step 3 on April 8, 2018 and received a failing score of 192. You registered for Step 3 again on May 2, 2018 and chose an eligibility period of May 1, 2018 through July 31, 2018. You submitted a request on July 16, 2018 to extend your eligibility through October 31, 2018. On October 30, 2018, you emailed FSMB and requested that your application be terminated and your registration fees be refunded.
- You sat for Step 3 again on December 28, 2018 and received a failing score of 178. You reapplied for Step 3 on January 23, 2019 and selected an eligibility period of February 1, 2019 through April 30, 2019. You submitted a request on April 22, 2019 to extend your eligibility through July 31, 2019. You did not sit for the Step examination during this eligibility period, and requested a refund for the registration fees via email on July 31, 2019. FSMB issued the refund in August 2019, which is represented on the payment summary you attached to your March 5, 2020 emails to FSMB and NBME.
- NBME and FSMB confirmed that there is no record of you requesting a score recheck for your April 8, 2018 Step 3 examination.
- Because the score report you provided to FSMB, NBME, and RIDOH bearing your name and USMLE identification number contains false information, this matter was referred to the Office of the USMLE Secretariat.

Therefore, on the basis of this evidence, there is reason to believe you may have engaged in irregular behavior. For your reference, I am enclosing a copy of “*United States Medical Licensing Examination (USMLE) Policies and Procedures Regarding Irregular Behavior*” and “*USMLE Policies and Procedures Regarding Score Validity*.”

As explained in the Policies and Procedures regarding Irregular Behavior, all pertinent information will be reviewed by the USMLE Committee for Individualized Review. As explained in paragraph B.4, you may submit an explanation and/or any other relevant information you wish the Committee to consider when it reviews this matter. Please

forward any such information to me to arrive in my office by **June 1, 2020** for distribution to the Committee on Individualized Review before its meeting on **August 18-19, 2020**.

You also have the opportunity to appear personally before the Committee. You are not required to appear in person before the Committee, although you may elect to do so, with or without legal counsel. Your clear and concise written response to the issues raised in this letter will be given the same careful consideration by the Committee as a personal appearance. The Committee is primarily interested in hearing directly from you in your own words. Please keep this in mind if you elect to retain and appear before the Committee with counsel. If you wish to do so, please let me know by **June 1, 2020**. If you elect to appear in person, you will receive an email advising you to appear on one of two dates, either August 18 or 19, 2020. Due to potential travel restrictions related to COVID-19, it is possible that alternative arrangements regarding personal appearances will be necessary. We will update you (and your attorney, if applicable) with any changes.

Please note that your access to USMLE is suspended during the investigation.

If you have any questions about this matter, please do not hesitate to contact me at USMLESec@nbme.org.

Sincerely,



Amy Buono
Office of the USMLE Secretariat

c: ECFMG
FSMB
NBME

Attachment

These are the initial emails Dr. Bowary sent to NBME and FSMB staff on March 5, 2020, which contained the falsified Step 3 score report, a fabricated email from NBME indicating that he had passed Step 3, and a refund summary for the refund he claims was for a subsequent registration for Step 3 that was "voided" when his score was changed.

From: Rachael Gillespie
To: [USMLESec](#)
Subject: IMPORTANT - Please Review - 08992844 [ref:_00D46pfBg_5004A1oJ2Zx:ref]
Date: Thursday, March 05, 2020 2:12:12 PM
Attachments: [IMG_7508.jpg](#)
[IMG_7509.jpg](#)
[IMG_7511.jpg](#)
[IMG_7512.jpg](#)
[IMG_7513.jpg](#)

Dear USMLE Sec:

Please review this examinee's allegation and attachments.

Sincerely,
 Rachael

----- Original Message -----

From: Bowary, Paul [paul_bowary@brown.edu]
Sent: 3/5/2020 1:57 PM
To: webmail@nbme.org
Subject: Fwd: Step 3 Score Report

To whom it may concern,

Please see below in re. to an urgent Step 3 Score Report matter. FSMB said they will contact NBME for clarification. If I were aware that this issue was not resolved since last year, I would have initiated this communication earlier. This caught me by surprise now, while submitting my full medical license application. I tried calling NBME but was informed that last year I was considered not certified yet and that's why NBME helped but now that my step 3 score is released, the person from NBME examinee support services was not able to help. Please guide me through this process as soon as possible as this is jeopardizing my license application and indirectly my professional future.

Thank You!

Paul Bowary

----- Forwarded message -----

From: Bowary, Paul <paul_bowary@brown.edu>
Date: Thu, Mar 5, 2020 at 1:23 PM
Subject: Step 3 Score Report
To: <usmle@fsmb.org>

To whom it may concern,

I am a 4th year Psychiatry resident at Brown. I was in contact with NBME's Examinee Support Services last summer in re. to my Step 3 rescoring. They were very helpful at that time and assisted me in submitting that request directly via their secretariat office. I was eventually informed that I passed and received the score report I am attaching along with a copy of an email from NBME explaining the process. I never checked in with FSMB after that as what I understood from the email was that the process will be automatic. I was able to get refunded though for the attempt that I understood was voided or for the application that I eventually did not need as I received my updated score (please see attached).

I am in the middle of my full medical license application, and while the RI medical board have my updated score report, they need you guys to contact them and verify it. It seems FCVS sent them documentation of me failing two step 3 attempts. FCVS say they only access FSMB records.

I tried to contact NBME myself, the person who spoke to me stated that I should be contacting FSMB for this. She could not see any records as she believes the records she has access to are not inclusive to all the records the Secretariat has which can be confidential. Could you please clarify this issue? This process has been emotionally exhausting since last year and I was not expecting I will have to go through it again during licensing.

I am sending everything as screenshots for more accuracy but also to avoid forwarding any email that NBME had urged me not to forward. I saved these copies for my program directors as advised by NBME in July.

Thank you in advance for your assistance and help!
 Looking forward to hearing from you.

Thank you
 Paul Bowary

--

Paul Bowary, M.D.
 PGY-IV Psychiatry Resident
 APA New England/Eastern Canada RFM Rep
 Butler Hospital/ Brown University, DPHB
 (VM) 401-455-6200 x26133

[Inline image URL: <https://docs.google.com/uc?export=download&id=1JS4Hhe1mdLiCxp1rQugj4XrBTBMAm6S&revid=0ByAKfBUaTQx4M2M4aGpUVXR3cHUyOUpnUmQyZ1NiNG51NWhBPQj>]

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Paul Bowary, M.D.

PGY-IV Psychiatry Resident
APA New England/Eastern Canada RFM Rep
Butler Hospital/ Brown University, DPHB
(VM) 401-455-6200 x26133

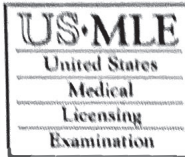
[Inline image URL : <https://docs.google.com/uc?export=download&id=1JS4Hhe1mdLiCcpp1rQugj4XrBTBMAm6S&revid=0ByAKfBUaTQx4M2M4aGpUVXR3cHUyOUpnUmQyZ1NiNG51NWWhBPQ>]

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ref:_00D46pfBg_5004A1oJ2Zx:ref



UNITED STATES MEDICAL LICENSING EXAMINATION[®]

STEP 3 SCORE REPORT

This score report is provided for the use of the examinee.

Third-party users of USMLE information are advised to rely solely on official USMLE transcripts.

Bowary, Paul

USMLE ID: 0-899-284-4

Test Date: April 8, 2018

The USMLE is a single examination program consisting of three Steps designed to assess an examinee's understanding of and ability to apply concepts and principles that are important in health and disease and that constitute the basis of safe and effective patient care. Step 3 is designed to assess whether an examinee can apply medical knowledge and understanding of biomedical and clinical science essential for the unsupervised practice of medicine, with emphasis on patient management in ambulatory settings. The examination consists of two days: Day 1, Foundations of Independent Practice (FIP), assesses an examinee's knowledge of basic medical and scientific principles essential for effective health care; Day 2, Advanced Clinical Medicine (ACM), assesses the examinee's ability to apply comprehensive knowledge of health and disease in the context of patient management and the evolving manifestation of disease over time. Results of the examination are reported to medical licensing authorities in the United States and its territories for use in granting an initial license to practice medicine. This score[§] represents your result for the administration of Step 3 that began on the test date shown above.

PASS

This result is based on the minimum passing score recommended by USMLE for Step 3. Individual licensing authorities may accept the USMLE-recommended pass/fail result or may establish a different passing score for their own jurisdictions.

199

This score is determined by your overall performance on Step 3. For administrations between January 1, 2017 and December 31, 2017, the mean and standard deviation for first-time examinees from U.S. and Canadian medical schools were approximately 226 and 15, respectively, with most scores falling between 140 and 260. A score of 196 is recommended by USMLE to pass Step 3. The standard error of measurement (SEM)[‡] for this scale is approximately six points.

[§]Effective April 1, 2013, test results are reported on a three-digit scale only. Test results reported as passing represent an exam score of 75 or higher on a two-digit scoring scale.

[‡]Your score is influenced both by your general understanding of clinical medicine and by the specific set of items selected for this Step 3 examination. The Standard Error of Measurement (SEM) provides an index of the variation in scores that would be expected to occur if an examinee were tested repeatedly using different sets of items covering similar content.

INFORMATION PROVIDED FOR EXAMINEE USE ONLY

The Performance Profile below is provided solely for the benefit of the examinee. These profiles are developed as assessment tools for examinees only and will not be reported or verified to any third party.

USMLE STEP 3 PERFORMANCE PROFILE

	Lower Performance	Borderline Performance	Higher Performance
EXAMINATION DAY 1			
Foundations of Independent Practice	XXXXXXXXXX		
EXAMINATION DAY 2			
Advanced Clinical Medicine (MCQ)		XXXXXXXXXX	
Advanced Clinical Medicine (CCS)		XXXXXXXXXXXXXXXXXX	
PHYSICIAN TASK			
MK: Applying Foundational Science Concepts		XXXXXXXXXXXXXXXXXX	
PC: Diagnosis		XXXXXXXXXXXX	
PC: Health Maint & Disease Prevent/Pharmacotherapy		XXXXXXXXXXXXXXXXXX	
PC: Clinical Interventions/Mixed Mgmt		XXXXXXXXXXXXXXXXXX	
Systems-based Practice/Patient Safety & PBLI		XXXXXXXXXXXX	
SYSTEM			
Immune/Blood & Lymph/Endocrine/Multisystem		XXXXXXXXXXXXXXXXXX	
Bhv Health & Soc Sci: Comm Skills/Ethics/Pt Safety		XXXXXXXXXXXXXXXXXX	
Nervous System & Special Senses		XXXXXXXXXXXXXXXXXX	
Musculoskeletal Sys/Skin & Subcutaneous Tissue		XXXXXXXXXXXXXXXXXX	
Cardiovascular System		XXXXXXXXXXXXXXXXXX	
Respiratory System		*XXXXXXXXXXXXXXXXXX	
Gastrointestinal System		XXXXXXXXXXXXXXXXXX	
Renal/Urinary & Male/Female Sys & Pregnancy		XXXXXXXXXXXXXXXXXX	
Biostatistics & Epidemiology/Population Health		XXXXXXXXXXXX	
PATIENT AGE			
Pediatric (Birth–17 yrs)		XXXXXXXXXXXXXXXXXX	
Young Adult/Middle-aged Adult (18–54 yrs)		XXXXXXXXXXXX	
Older Adult (55–74 yrs)		XXXXXXXXXXXX	
Elderly (Older than 74 yrs)		XXXXXXXXXXXXXXXXXX	

The above Performance Profile is provided to aid in self-assessment. The shaded area defines a borderline level of performance for each content area; borderline performance is comparable to HIGH FAIL / LOW PASS on the total test.

Performance bands indicate areas of relative strength and weakness. Some bands are wider than others. The width of a performance band reflects the precision of measurement: narrower bands indicate greater precision. The band width for a given content area is the same for all examinees. An asterisk indicates that your performance band extends beyond the displayed portion of the scale. Small differences in the location of bands should not be overinterpreted. If two bands overlap, the performance in the associated areas should be interpreted as similar.

Descriptions of the topics covered in these content areas, as well as other topics covered on USMLE Step 3, can be found in the informational materials for USMLE Step 3 on the USMLE website (<http://www.usmle.org/step-3/#outlines>). With the exception of the Day 2 Advanced Clinical Medicine CCS profile, all profiles are based upon performance in the MCQ sections.


CCS—Computer-based Case Simulation; MCQ—Multiple-choice Question; MK—Medical Knowledge; PC—Patient Care; PBLI—Practice-based Learning and Improvement.

Dr. Bowary sent this falsified Step 3 Score Report to NBME as a JPEG file via email on March 5, 2020.



USMLE Step 3 Report.pdf





UNITED STATES MEDICAL LICENSING EXAMINATION®

STEP 3 SCORE REPORT

This score report is provided for the use of the examinee. Third-party users of USMLE information are advised to rely solely on official USMLE communications.

Bowary, Paul
USMLE ID: 0-899-284-4 **Test Date: April 8, 2018**

The USMLE is a single examination program consisting of three Steps designed to assess an examinee's understanding of and ability to apply concepts and principles that are important in health and disease and that constitute the basis of safe and effective patient care. Step 3 is designed to assess whether an examinee can apply medical knowledge and understanding of biomedical and clinical science essential for the unsupervised practice of medicine, with emphasis on patient management in ambulatory settings. The examination consists of two days: Day 1, Foundations of Independent Practice (FIP), assesses an examinee's knowledge of basic medical and scientific principles essential for effective health care; Day 2, Advanced Clinical Medicine (ACM), assesses the examinee's ability to apply comprehensive knowledge of health and disease in the context of patient management and the evolving manifestation of disease over time. Results of the examination are reported to medical licensing authorities in the United States and its territories for use in granting an initial license to practice medicine. This score represents your result for the administration of Step 3 that began on the test date shown above.

PASS This result is based on the minimum passing score recommended by USMLE for Step 3. Individual licensing authorities may accept the USMLE-recommended pass/fail result or may establish a different passing score for their own jurisdiction.

199 This score is determined by your overall performance on Step 3. For administrations between January 1, 2017 and December 31, 2017, the mean and standard deviation for first-time examinees from U.S. and Canadian medical schools were approximately 226 and 15, respectively, with most scores falling between 140 and 260. A score of 196 is recommended by USMLE to pass Step 3. The standard error of measurement (SEM)¹ for this scale is approximately six points.

¹Effective April 1, 2013, test results are reported on a three-digit scale only. Test results reported as passing represent an exam score of 75 or higher on a two-digit scoring scale.

²Your score is influenced both by your general understanding of clinical medicine and by the specific set of items selected for this Step 3 examination. The Standard Error of Measurement (SEM) provides an index of the variation in scores that would be expected to occur if an examinee were tested repeatedly using different sets of items covering similar content.

INFORMATION PROVIDED FOR EXAMINEE USE ONLY

The Performance Profile below is provided solely for the benefit of the examinee. These profiles are developed as assessment tools for examinees only and will not be reported or verified to any third party.

USMLE STEP 3 PERFORMANCE PROFILE

	Lower Performance	Borderline Performance	Higher Performance
EXAMINATION DAY 1			
Foundations of Independent Practice		XXXXXXXXXX	
EXAMINATION DAY 2			
Advanced Clinical Medicine (MCQ)		XXXXXXXXXXXX	
Advanced Clinical Medicine (CCS)		XXXXXXXXXXXXXX	
PHYSICIAN TASK			
Wk: Applying Foundational Sciences Concepts		XXXXXXXXXXXX	
PC: Diagnosis		XXXXXXXXXXXX	
PC: Health Maint & Disease Prevent/Pharmacotherapy		XXXXXXXXXXXXXX	
PC: Clinical Interventions/Mixed Mgmt		XXXXXXXXXXXXXX	
System-based Practice/Patient Safety & PBL		XXXXXXXXXXXX	
SYSTEM			
Immune/Blood & Lymph/Endocrine/Nervous System		XXXXXXXXXXXXXX	
Body Health & Soc Sci: Common Ethical/Ethical/Pt Safety		XXXXXXXXXXXXXX	
Nervous System & Special Senses		XXXXXXXXXXXXXX	
Musculoskeletal System & Subcutaneous Tissue		XXXXXXXXXXXXXX	
Cardiovascular System		XXXXXXXXXXXXXX	
Reproductive System		XXXXXXXXXXXXXX	
Gastrointestinal System		XXXXXXXXXXXXXX	
Renal/Urinary & Male/Female Sex & Pregnancy		XXXXXXXXXXXXXX	
Biostatistics & Epidemiology/Population Health		XXXXXXXXXXXX	

PROPRIETARY AND CONFIDENTIAL MATERIALS - NOT FOR DISTRIBUTION
 This result is based on the minimum passing score recommended by USMLE for Step 3. Individual licensing authorities may accept the USMLE-recommended pass/fail result or may establish a different passing score for their own jurisdictions.

PASS

This result is based on the minimum passing score recommended by USMLE for Step 3. Individual licensing authorities may accept the USMLE-recommended pass/fail result or may establish a different passing score for their own jurisdictions.

199

This score is determined by your overall performance on Step 3. For administrations between January 1, 2017 and December 31, 2017, the mean and standard deviation for first-time examinees from U.S. and Canadian medical schools were approximately 226 and 15, respectively, with most scores falling between 140 and 260. A score of 196 is recommended by USMLE to pass Step 3. The standard error of measurement (SEM) for this scale is approximately six points.

¹Effective April 1, 2013, test results are reported on a three-digit scale only. Test results reported as passing represent an exam score of 73 or higher on a two-digit scoring scale.

²Your score is influenced both by your general understanding of clinical medicine and by the specific set of items selected for this Step 3 examination. The Standard Error of Measurement (SEM) provides an index of the variation in scores that would be expected to occur if an examinee were tested repeatedly using different sets of items covering similar content.

INFORMATION PROVIDED FOR EXAMINEE USE ONLY

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USMLE STEP 3 PERFORMANCE PROFILE

	Lower Performance	Borderline Performance	Higher Performance
EXAMINATION DAY 1			
Foundations of Independent Practice	XXXXXXXXXX		
EXAMINATION DAY 2			
Advanced Clinical Medicine (MCQ)	XXXXXXXXXXXX		
Advanced Clinical Medicine (CCS)	XXXXXXXXXXXXXXXX		
PHYSICIAN TASK			
MK: Applying Foundational Science Concepts	XXXXXXXXXXXX		
PC: Diagnosis	XXXXXXXXXX		
PC: Health Maint. & Disease Prev./Pharmacotherapy	XXXXXXXXXXXX		
PC: Clinical Interventions/Mixed Mgmt.	XXXXXXXXXXXX		
Systems-based Practice/Patient Safety & PBL	XXXXXXXXXXXX		
SYSTEM			
Immunological & Lymph/Endocrine/Metabolic System	XXXXXXXXXXXX		
Integ. Health & Soc. Sci. Comm. Skills/Ethics/Pt. Safety	XXXXXXXXXXXX		
Nervous System & Special Senses	XXXXXXXXXXXX		
Musculoskeletal System & Skin & Subcutaneous Tissue	XXXXXXXXXXXX		
Cardiovascular System	XXXXXXXXXXXX		
Respiratory System	*XXXXXXXXXXXX		
Gastrointestinal System	XXXXXXXXXXXX		
Renal/Urinary & Male/Female Sys. & Pregnancy	XXXXXXXXXXXX		
Biostatistics & Epidemiology/Population Health	XXXXXXXXXXXX		
PATIENT AGE			
Pediatric (Birth-17 yrs)	XXXXXXXXXXXX		
Young Adult/Middle-aged Adult (18-54 yrs)	XXXXXXXXXXXX		
Older Adult (55-74 yrs)	XXXXXXXXXXXX		
Elderly (Older than 74 yrs)	XXXXXXXXXXXX		

The above Performance Profile is provided to aid in self-assessment. The shaded area defines a borderline level of performance for each content area; borderline performance is comparable to HIGH FAIL/LOW PASS on the total test.

Performance bands indicate areas of relative strength and weakness. Some bands are wider than others. The width of a performance band reflects the precision of measurement; narrower bands indicate greater precision. The band width for a given content area is the same for all examinees. An asterisk indicates that your performance band extends beyond the displayed portion of the scale. Small differences in the location of bands should not be over interpreted. If two bands overlap, the performance in the associated areas should be interpreted as similar.

Descriptions of the topics covered in these content areas, as well as other topics covered on USMLE Step 3, can be found in the informational materials for USMLE Step 3 on the USMLE website (<http://www.usmle.org/step-3/outlines>). With the exception of the Day 2 Advanced Clinical Medicine (CCS) profile, all profiles are based upon performance in the MCQ sections.

CCS—Computer-based Case Simulation; MCQ—Multiple-choice Question; MK—Medical Knowledge; PC—Patient Care; PBL—Practice-based Learning and Improvement.



Bowary, Paul <paul_bowary@brown.edu>

Re. USMLE Step 3 Score Report

Nbme <webmail@nbme.org> To:
Paul Bowary <paul_bowary@brown.edu>

Mon, Jul 8, 2019 at 4:26 PM

This is the falsified email Dr. Bowary sent to NBME, FSMB, and RIDOH as a PDF, JPG, forwarded email, and attached as an email.

Dear Dr Bowary,

Please be advised that our communication, including this email, is as confidential as your NBME examination content. The NBME reserves the right to discontinue examination services to an individual or an institution at any time in order to maintain the security and integrity of NBME's examination programs. However, given the nature and timeline of this issue in your case, it is necessary for you to communicate this information with your program directors. I would recommend that you do not forward this email to your directors and rather relay the message to them in person and advise them to contact NBME with any questions or concerns.

Dr Bowary, I apologize for the delay. I appreciate your patience throughout this whole process. Thank you for sharing all the delicate information and important documentation that NBME requested. I also appreciate your very detailed email that explained your challenges on your examination day and the negative impact this issue has had on your training.

After thoroughly investigating this case and reviewing all the dates of certain reports and of your requests, it became clearer that the confusion around your USMLE score reports may have potentially stemmed from miscommunication. Your USMLE Step 3 score report was not primarily delayed due to ECFMG-related matter. The delay was the direct result of the following situation: you were authorized to take this test again, while your first attempt had a score recheck inquiry attached to it. Unfortunately, the score recheck requests take months to be processed when not submitted through FSMB directly (you had initiated this inquiry through NBME).

Your updated Step 3 score was available, shortly after your second attempt date, reflecting a PASS classification. This score report could not be released as you had another active Step 3 application on file. There were multiple failed attempts to contact you by phone in January, February and March 2019. Your phone number listed in our system is (401) 465- 1179. Currently, I am sharing with you your reanalyzed USMLE Step 3 test results of your first attempt (test date: April 8, 2018). Once you approve the attached score report, any Step 3 attempts made after the test date on the report will be considered void and removed from NBME's and FSMB's system. You will be refunded for the voided attempt.

Please accept my apologies for any gaps in your communication with NBME since the start of this process. It took me a full week of investigation to figure out what has been going on. I can only imagine how stressful this has been for you. I hope this email helped answer all your questions. Given the sensitivity of this issue, we avoid discussing these details with any parties other than yourself. However, if your program directors have any further questions or concerns, please contact NBME to schedule a conference call that you will be required to attend.

If we do not hear back from you in the upcoming 48 hours in regards to your approval of the attached USMLE score report, we will consider this score report (with a PASS classification), as your official score report and will route it along with a report of our communication with you to FSMB.

Thank you.

Yours faithfully,

A drawing

NBME

Examinee Support Services

3750 Market Street
Philadelphia, PA 19104-3102
Telephone: (215) 590-9700
Fax: (215) 590-9460
E-mail: webmail@nbme.org
Website: <http://www.nbme.org>

Examinee Support Services became Customer Operations Management in April 2017, over two years before this email is purported to have been sent.



 **USMLE Step 3 Report.pdf**
130K



Payment Summary

Customer: Paul Bowary
Transaction Date: 08/15/2019
Payment For: RTN (Refund)
Invoice #: RTN0026602
Total: \$775.00
Balance: \$0.00

Dr. Bowary attached this payment summary to his March 5, 2020 email to NBME as a JPEG file. He purported that he received the refund in 2019 for his December 2018 Step 3 registration, following a score recheck and adjustment to a passing score of his April 2018 Step 3 administration. No score recheck was performed or requested by Dr. Bowary.

Total Quantity	Item Description	Unit Price	Extended Price
1	USMLE Admin Fee	((\$100.00))	((\$100.00))
1	STEP 3 EXAM FEE	(\$875.00)	(\$875.00)



UNITED STATES MEDICAL LICENSING EXAMINATION®

STEP 3 SCORE REPORT

This score report is provided for the use of the examinee.

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Bowary, Paul

USMLE ID: 0-899-284-4

Test Date: April 8, 2018

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PASS

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199

This score is determined by your overall performance on Step 3. For administrations between January 1, 2017 and December 31, 2017, the mean and standard deviation for first-time examinees from U.S. and Canadian medical schools were approximately 226 and 15, respectively, with most scores falling between 140 and 260. A score of 196 is recommended by USMLE to pass Step 3. The standard error of measurement (SEM)[‡] for this scale is approximately six points.

[§]Effective April 1, 2013, test results are reported on a three-digit scale only. Test results reported as passing represent an exam score of 75 or higher on a two-digit scoring scale.

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USMLE STEP 3 PERFORMANCE PROFILE

	Lower Performance	Borderline Performance	Higher Performance
EXAMINATION DAY 1			
Foundations of Independent Practice	xxxxxxxxxx		
EXAMINATION DAY 2			
Advanced Clinical Medicine (MCQ)		xxxxxxxxxxxxxx	
Advanced Clinical Medicine (CCS)		xxxxxxxxxxxxxxxxxx	
PHYSICIAN TASK			
MK: Applying Foundational Science Concepts		xxxxxxxxxxxxxxxxxx	
PC: Diagnosis		xxxxxxxxxxxxxx	
PC: Health Maint & Disease Prevent/Pharmacotherapy		xxxxxxxxxxxxxxxxxx	
PC: Clinical Interventions/Mixed Mgmt		xxxxxxxxxxxxxxxxxx	
Systems-based Practice/Patient Safety & PBLI		xxxxxxxxxxxxxx	
SYSTEM			
Immune/Blood & Lymph/Endocrine/Multisystem		xxxxxxxxxxxxxxxxxx	
Bhv Health & Soc Sci: Comm Skills/Ethics/Pt Safety		xxxxxxxxxxxxxxxxxx	
Nervous System & Special Senses		xxxxxxxxxxxxxxxxxx	
Musculoskeletal Sys/Skin & Subcutaneous Tissue		xxxxxxxxxxxxxxxxxx	
Cardiovascular System		xxxxxxxxxxxxxxxxxx	
Respiratory System	*xxxxxxxxxxxxxx		
Gastrointestinal System		xxxxxxxxxxxxxxxxxx	
Renal/Urinary & Male/Female Sys & Pregnancy		xxxxxxxxxxxxxxxxxx	
Biostatistics & Epidemiology/Population Health		xxxxxxxxxxxxxx	
PATIENT AGE			
Pediatric (Birth–17 yrs)		xxxxxxxxxxxxxx	
Young Adult/Middle-aged Adult (18–54 yrs)		xxxxxxxxxxxxxx	
Older Adult (55–74 yrs)		xxxxxxxxxxxxxx	
Elderly (Older than 74 yrs)		xxxxxxxxxxxxxxxxxx	

The above Performance Profile is provided to aid in self-assessment. The shaded area defines a borderline level of performance for each content area; borderline performance is comparable to HIGH FAIL / LOW PASS on the total test.

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CCS—Computer-based Case Simulation; MCQ—Multiple-choice Question; MK—Medical Knowledge; PC—Patient Care; PBLI—Practice-based Learning and Improvement.

EXHIBIT P-2

From: [USMLESec](#)
To: KWoodward@grieco-law.com
Subject: Dr. Bowary - Part 2 (08992844)
Attachments: [image001.png](#)
[Dr. Bowary - CIR Materials - Part 2.pdf](#)

Please reply to confirm receipt.

Thank you,

Amber
Program Manager
Office of the USMLE Secretariat

T +1 215-590-9873
E usmlesec@nbme.org
W usmle.org



3750 Market Street, Philadelphia PA 19104, USA

The following is correspondence between Secretariat staff, Dr. Bowary, and Dr. Tracey Guthrie (Dr. Bowary's residency Program Director) regarding the investigation of his issue.

Date: March 6, 2020

To: Dr. Bowary

From: Secretariat's Office

The email and attachments that you sent to FSMB and NBME regarding your Step 3 score were forwarded to the Office of the USMLE Secretariat for review. We will be in further contact with you soon; please allow 1-2 weeks for a response.

In the meantime, if you have any questions please contact our office via email at USMLESec@nbme.org.

Date: March 10, 2020

To: Dr. Bowary

From: Secretariat's Office

I am in receipt of your voicemail from earlier today requesting an update on your issue.

As Ms. Miller stated on March 6, we are currently investigating your issue and will reach out to you as soon as we are able. Please allow 1-2 weeks for a response.

If you have any other questions, please contact our office via email at USMLESec@nbme.org.

Date: March 12, 2020

To: Secretariat's Office

CC: Tracey Guthrie

From: Dr. Bowary

I got your response. I discussed this with my program director and I am adding her to this email. I understand you are asking me to wait for 1-2 weeks.

I am writing to make sure I communicated my concerns correctly and clearly: once again, this issue is affecting my training, my medical license application, my visa paperwork and thus my job application. It is my right as a trainee not to experience the emotional stress that this is causing.

I am still looking forward to hearing from you and I am hoping we can receive a clear explanation of what went wrong. At this point, I will be consulting our hospital's attorney to weigh in on this matter.

Date: March 17, 2020

To: Dr. Bowary

From: Secretariat's Office

Thank you for your patience while our office investigates this matter. Please send the original email from July 8, 2019 that you state you received from NBME with a Step 3 Score Report attached. Previously you've sent copies as a JPEG and as a forwarded message. Please attach the original email in its entirety to an email and send it to USMLESec@nbme.org.

Date: March 17, 2020

To: Secretariat's Office

CC: Tracey Guthrie

From Dr. Bowary

This is not true. I have sent screenshots in the past as requested by Rachel. I have also "forwarded" the email - with attached scores - multiple times to you and to Deborah from FSMB 11 days ago. My director cc-ed here was also cc-ed on that forwarded email. Please see below. I can forward it again but I truly cannot delay this more. I hope you can understand.

Thanks

Paul Bowary

----- Forwarded message -----

From: **Bowary, Paul** <paul_bowary@brown.edu>

Date: Fri, Mar 6, 2020 at 3:08 PM

Subject: [] Fwd: Re: USMLE Step 3 Score Report - case 00392281

To: <webmail@nbme.org>, <USMLESec@nbme.org>

Cc: Deborah Cusson (FSMB) <dcusson@fsmf.org>

Please see below as requested by Rachael from customer operations management at NBME earlier this morning.

At this point, this issue is jeopardizing my professional future. It is truly unfair that I was given the impression and guarantee that this was resolved last summer only to find out it isn't at the time of my medical license application a year later.

I have not slept for the past 2 nights because of how concerned and confused I am. I appreciate that you escalated this issue in a timely fashion but please help me by providing an official update as soon as possible.

Thank you for understanding and assistance!

Best,

Paul Bowary

----- Forwarded message -----

From: **Nbme** <webmail@nbme.org>

Date: Mon, Jul 8, 2019 at 4:26 PM
Subject: Re. USMLE Step 3 Score Report
To: Paul Bowary <paul_bowary@brown.edu>

Dear Dr Bowary,

Please be advised that our communication, including this email, is as confidential as your NBME examination content. The NBME reserves the right to discontinue examination services to an individual or an institution at any time in order to maintain the security and integrity of NBME's examination programs. However, given the nature and timeline of this issue in your case, it is necessary for you to communicate this information with your program directors. I would recommend that you do not forward this email to your directors and rather relay the message to them in person and advise them to contact NBME with any questions or concerns.

Dr Bowary, I apologize for the delay. I appreciate your patience throughout this whole process. Thank you for sharing all the delicate information and important documentation that NBME requested. I also appreciate your very detailed email that explained your challenges on your examination day and the negative impact this issue has had on your training.

After thoroughly investigating this case and reviewing all the dates of certain reports and of your requests, it became clearer that the confusion around your USMLE score reports may have potentially stemmed from miscommunication. Your USMLE Step 3 score report was not primarily delayed due to ECFMG-related matter. The delay was the direct result of the following situation: you were authorized to take this test again, while your first attempt had a score recheck inquiry attached to it. Unfortunately, the score recheck requests take months to be processed when not submitted through FSMB directly (you had initiated this inquiry through NBME).

Your updated Step 3 score was available, shortly after your second attempt date, reflecting a PASS classification. This score report could not be released as you had another active Step 3 application on file. There were multiple failed attempts to contact you by phone in January, February and March 2019. Your phone number listed in our system is (401) 465- 1179. Currently, I am sharing with you your reanalyzed USMLE Step 3 test results of your first attempt (test date: April 8, 2018). Once you approve the attached score report, any Step 3 attempts made after the test date on the report will be considered void and removed from NBME's and FSMB's system. You will be refunded for the voided attempt.

Please accept my apologies for any gaps in your communication with NBME since the start of this process. It took me a full week of investigation to figure out what has been going on. I can only imagine how stressful this has been for you. I hope this email helped answer all your questions. Given the sensitivity of this issue, we avoid discussing these details with any parties other than yourself. However, if your program directors have any further questions or concerns, please contact NBME to schedule a conference call that you will be required to attend.

If we do not hear back from you in the upcoming 48 hours in regards to your approval of the attached USMLE score report, we will consider this score report (with a PASS classification), as your official score report and will route it along with a report of our communication with you to FSMB.

Thank you.

Yours faithfully,

NBME

Examinee Support Services

3750 Market Street

Philadelphia, PA 19104-3102

Telephone: (215) 590-9700

Fax: (215) 590-9460

E-mail: webmail@nbme.org

Website: <http://www.nbme.org>

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March 17, 2020

To: Dr. Bowary

CC: Tracey Guthrie

From: Secretariat's Office

We have received the email from NBME as a screenshot and imbedded in an email as a forwarded message, but we are asking for a copy of the email in its original format. As I said in my email earlier today (attached), please attach the email in its entirety to an email and send it to our office at USMLESec@nbme.org.

March 18, 2020

To: Secretariat's Office

CC: Dr. Bowary

From: Tracey Guthrie

As Dr. Bowary's program director, I am in desperate need of his passing USMLE step 3 report.

It has severe consequences for him.

I have been waiting for this for several months. I need to have it directly from USMLE.

I anxiously await your reply.

Staff in the Secretariat's office called Dr. Guthrie and confirmed that this email is authentic.

This is an analysis of the falsified score report PDF sent to the Secretariat's office, completed by an NBME staff member.

Report on Falsified Score Report for Paul Bowary

1. This is a report on an altered USMLE Step 3 score report for Paul Bowary, USMLE ID 0-899-284-4. Dr. Bowary is a May 2014 graduate of American University of Beirut Faculty of Medicine. He has applied to take Step 3 five times but tested only twice. For the other three applications, he has terminated one and didn't schedule nor test during his eligibility period for two others. Of the two Step 3 attempts he did complete,
 - a. On his 4/8 - 4/10/2018 attempt, he failed with a score of 192, reported on 5/2/2018. The minimum passing score for Step 3 at that time was 196.
 - b. On his 12/28 - 12/29/2018 attempt, he failed with a score of 178, reported on 1/23/2019. The minimum passing score for Step 3 at that time was 196.
2. The submitted PDF of the Step3 score report displays these features:
 - a. The name shown is Paul Bowary, USMLE_ID 0-899-284-4, with test date of April 8, 2018, and is labeled a PASS with a score of 199.
 - b. Minimum Passing Score of 196 cited in the 2nd text box is true for examinations taken between January 2016 and December 2019.
 - c. The Standard Error of Measurement (SEM) and also the Mean and Standard Deviation for first-time US/Canadian examinees between January 1, 2017 and December 31, 2017 displayed in 2nd text box are true for score reports released between February 28, 2018 and January 23, 2019.
 - d. The Score Categories displayed on the page 2 Performance Profile are those shown on Step 3 score reports released between February 24, 2016 and January 23, 2019.
 - e. Given the points in b, c, d above, this score report is from an administration reported between February 2018 and January 2019, which coincides with Dr. Bowary's first complete Step 3 attempt in April 2018.
 - f. There are 21 Score Categories on the page 2 Performance Profile.
 - i. USMLE reported these 21 categories on Step 3 score reports released between February 24, 2016 and January 23, 2019.
 - ii. There are 81,372 Step 3 score reports reported during this time span with these 21 categories.
 - iii. Only one score report matches exactly on all 21 categories, that for Dr. Bowary's April 2018 attempt. So, this performance profile is that reported to him on May 2, 2018.
 - g. The "PASS" and "199" are in a typeface point size much larger than on actual USMLE score reports from that time. These two items of the score report are clear falsifications. The other text and performance profile bands appear to be unaltered.
3. Examining the PDF of the Step 3 score report reveals...
 - a. The password protection has been removed and Advanced Document Properties shows that the PDF Producer is "GPL Ghostscript 9.05". Ghostscript can be used as a file format converter, such as from a password protected PDF to another file format and then even back to PDF. This is not the software that creates actual USMLE score reports. Thus, an actual USMLE score report has been modified with GPL Ghostscript.

- b. As noted previously, the “PASS” and “199” are obvious alterations of the original score report.
- c. The uniqueness of the performance profile band must be recognized. Out of over 80,000 Step 3 score reports with these score categories, only that from Dr. Bowary’s April 2018 attempt matches on all 21 categories. The next closest match is on only 7 categories. If Dr. Bowary’s total test score were to have changed upon rescoring, which it surely has not, but if it were to have changed, the rescoring would have produced a different performance profile because the underlying subscores would have changed, too.

In conclusion, there is convincing evidence that the submitted Step 3 score report PDF is an alteration of the actual score report of Paul Bowary from his April 2018 attempt, in which the pass/fail outcome and total score have been altered and done so rather obviously. No other element on the score report appears to have been altered.

Description Security Fonts Initial View Custom Advanced

Description

File: USMLE Step 3 Report

Title: USMLE Step 3 Score Report.pdf

Author: NBME

Subject:

Keywords:

Created: 3/6/2020 2:52:32 PM

Additional Metadata...

Modified: 3/6/2020 2:52:32 PM

Application: PDFCreator Version 1.6.2

Advanced

PDF Producer: GPL Ghostscript 9.05

PDF Version: 1.4 (Acrobat 5.x)

Location: C:\Users\nmiller\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\RY3IOZTV\

File Size: 129.13 KB (132,225 Bytes)

Page Size: 8.50 x 11.00 in

Number of Pages: 2

Tagged PDF: No

Fast Web View: No

Help

OK

Cancel

Secretariat's office staff asked Dr. Bowary to forward the original email from NBME regarding his purported score change and provided instructions for submitting an original copy of the email after he sent it in JPEG and PDF format. He was unable to produce an original. The email is fraudulent and was analyzed by NBME staff.

Date: March 17, 2020

To: Paul Bowary

From: Office of the USMLE Secretariat Staff

Dear Dr. Bowary,

In this email you've attached the score report to a forwarded copy of the email from NBME, but not the original email. Please attach the original email.

Date: March 17, 2020

To: Office of the USMLE Secretariat Staff

From: Paul Bowary

Hi Nicole,

This is what I get when I try to download the original email. Please see attached.

Date: March 17, 2020


To: Paul Bowary

From: Office of the USMLE Secretariat Staff

Dear Dr. Bowary,

Thank you for your attention in this regard. Unfortunately,, what you've sent is the email in PDF format, which is not the original format of the email. If you are using Gmail through Brown University, [here](#) is a guide on how to attach an email in that program. Below please find the section that gives you the steps that you would need to take to send the email in its original format by replying to one of our emails.

Reply with an attached email

1. On your computer, go to [Gmail](#).
2. Open the email > click Reply.
3. At the top right of the email, click the Pop out icon .
4. From your inbox, select the email you want to attach.
5. Drag the email into your message.
6. At the bottom, click Send.

If you have any additional questions or if you are unable to complete these steps, please let me know.

Date: March 19, 2020

To: Office of the USMLE Secretariat Staff

From: Paul Bowary

Hi Nicole,

I missed this last reply. I am submitting all I have as attachments as you requested.

I would highly appreciate a clarification of what all these requests are insinuating though because if you would take a minute to actually put yourself in my shoes you'd realize this whole process should not be acceptable. A trainee who has not done anything wrong, who reached out to nbme explaining "hey I have [REDACTED] and it happened to me during my test" and been re-assured and only informed that he passed his first test after taking it again.. should in no way be treated like this when he asks you how come fsmb did not update my score report.

I am not sure what is missing on your side but I promise on our side here, we only followed what we were told.

Please clarify..

Thank you!

[Note: The attachment provided was the falsified email analyzed by NBME staff in the agenda materials.]

EXHIBIT P-3

From: [USMLESec](#)
To: KWoodward@grieco-law.com
Subject: Dr. Bowary - Part 3 (08992844)
Attachments: [image001.png](#)
[Dr. Bowary - CIR Materials - Part 3.pdf](#)

Please reply to confirm receipt.

Thank you,

Amber
Program Manager
Office of the USMLE Secretariat

T +1 215-590-9873
E usmlesec@nbme.org
W usmle.org



3750 Market Street, Philadelphia PA 19104, USA

This is an analysis of the falsified email sent to the Secretariat's office as an attached email, completed by an NBME staff member.

Examinee Fraudulent Email Analysis – Proof of Concept

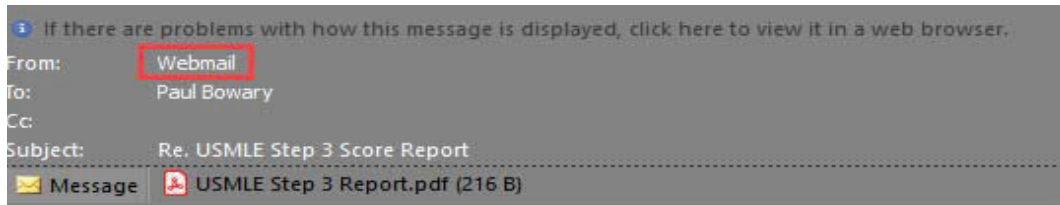
In response to the situation where the USMLE Secretariat received a fraudulent email attachment from an examinee who claimed it was an actual email they received from Webmail@nbme.org. IT Security performed a technical analysis resulting in evidence that proves the email was not sent from the actual Webmail@nbme.org address. Based on our analysis, we suspect that email spoofing¹ occurred.

I. Evidence

1. Generating Fraudulent Emails

The email sent as an attachment from the examinee paul_bowary@brown.edu that was claimed to be a legitimate email from Webmail@nbme.org could have been easily forged by leveraging a local mail server on their own computer and populating the “To/From” addresses manually using a wide variety of tools.

A screenshot of the fraudulent email is shown below showing the “From” address.



Dear Dr Bowary,

I apologize for the delay. I appreciate your patience throughout this whole process.

Please be advised that our communication, including this email, is as confidential examination programs. However, given the nature and timeline of this issue in your advise them to contact NBME with any questions or concerns.

Dr Bowary, I appreciate you sharing with me all the delicate information and importa

Figure 1: Fraudulent Email the Examinee Claims to be from Webmail@nbme.org

Now, here is an example of an email I’ve crafted and sent to myself using the python programming language and a locally hosted mail server on my computer.

¹ Email spoofing is the fabrication of an email header in the hopes of duping the recipient into thinking the email originated from someone or somewhere other than the intended source.



Figure 2: Proof that an Email can be auto-generated with a fraudulent sender address

Note that I do not have access to the Webmail@nbme.org inbox. It is evident that the examinee could have easily crafted their own fraudulent email using similar methods.

2. Email Header Analysis

Additional evidence from the email headers shows the email did not get passed through any relay servers. If the email was actually sent from Webmail@nbme.org, the headers would have been populated differently.

Below is a screenshot showing the headers of the fraudulent email.

Headers Found

Header Name	Header Value
MIME-Version	1.0
Date	Mon, 8 Jul 2019 16:26:59 -0400
Message-ID	<CAJD84yhy6pAb8zFFQdp-H1Sj36L8w+n1fvoMBzHzaFJf6PUD-A@mail.gmail.com>
Subject	Re. USMLE Step 3 Score Report
From	Nbme <webmail@nbme.org>
To	Paul Bowary <paul_bowary@brown.edu>
Content-Type	multipart/mixed; boundary="0000000000000718cbc05a012458b"

Figure 3: Headers from the Fraudulent Email

The next image shows what the header information should look like when a legitimate email from Webmail@nbme.org is sent out via Salesforce. NBME has been sending emails from the Webmail@nbme.org address since November 2017 and we can clearly see the initial sender originates from the Salesforce domain in these legitimate email headers within the highlighted section in Figure 4.

Headers Found

Header Name	Header Value
Authentication-Results	spf=softfail (sender IP is 65.207.85.16) smtp.mailfrom=v0pmtnn3u42lpn0n.mxsyxwx.46-pfbg
Received-SPF	SoftFail (protection.outlook.com: domain of transitioning v0pmtnn3u42lpn0n.mxsyxwx.46-pfbg
Authentication-Results-Original	ppops.net; spf=pass smtp.mailfrom=webmail@nbme.org__0-4gmfwfwl9qs69h.0a55le016n6xw
Date	Fri, 3 Apr 2020 14:40:50 +0000
From	"webmail@nbme.org" <webmail@nbme.org>
To	"smaiorino@nbme.org" <smaiorino@nbme.org>
Message-ID	<g1hUh00Q87VG200tM_1k07gSyWj-v
Subject	NBME Customer Support - Case #00404548 [ref:_00D46pfBg_5004A1uisiU:ref]
Content-Type	multipart/alternative; boundary="-----_Part_3412_415347963.1585924850337"
X-SFDC-LK	00D46000000pfBg
X-SFDC-User	0054600000113DM
X-Sender	postmaster@salesforce.com
X-SFDCOrgRelay	00D46000000pfBg

Figure 4: Headers from a Legitimate Email Sent from Webmail@nbme.org via Salesforce

Notice the ample amount of header information compared to Figure 3. Much more information persists in these headers, but this is enough to show the difference between both emails. Figure 3 does not contain any header information that matches Figure 4, meaning the examinee's email could not have come from the NBME Salesforce application.

The next page shows an example of what the headers look like when sending an email from Outlook while signed into the NBME domain. The account password along with DUO two-factor authentication is required to send emails this way. I sent an email to my personal g-mail account as an example.

Headers Found

Header Name	Header Value
Delivered-To	[REDACTED]
X-Google-Smtp-Source	APiQypLyF8xeTIXSbiE+R1o7JOWBHFQ7j8pZSsEH0ATrdIcbkx2RXZa3nNe9bMF6yXuqbvvbt81C
X-Received	by 2002.a25.23c5:: with SMTP id j188mr7331813ybj.308.1585846212169; Thu, 02 Apr 2020 09:50:12 -0700 (PDT)
Return-Path	<SMAiorino@nbme.org>
Received-SPF	pass (google.com: domain of smaiorino@nbme.org designates 148.163.158.80 as permitted sender) client-ip=148.163.158.80; envelope-from=smaiorino@nbme.org; helo=mail-nbme-org; ip=148.163.158.80; mailfrom=SMAiorino@nbme.org; recipient-domain=nbme.org; smtp-id=j188mr7331813ybj.308.1585846212169; t=1585846212169; version=3; x-gmsl=AAKwvNzPCVo7dzWrWJ7MY4dyJqBjbk9JDyhDX5k1r>Ksej1UIFFCCGv3CxA37/9yaDrjp9alk4a1utLCV2jkXhJ2BozoqiKF2luaw1MUsm4J81yu6ZSYbMugwlGACVJM/CKLxabMV4
ARC-Seal	i=1; a=rsa-sha256; s=arcselector9901; d=microsoft.com; cv=none; b=AVwNZPCVo7dzWrWJ7MY4dyJqBjbk9JDyhDX5k1r>Ksej1UIFFCCGv3CxA37/9yaDrjp9alk4a1utLCV2jkXhJ2BozoqiKF2luaw1MUsm4J81yu6ZSYbMugwlGACVJM/CKLxabMV4
ARC-Message-Signature	i=1; a=rsa-sha256; c=relaxed/relaxed; d=microsoft.com; s=arcselector9901; h=From:Date:Subject:Message-ID:Content-Type:LcjHUSk/EJEBMDEYL6ryca9xglRvCSIO4tJUXXK3zYlvHsU2Ek1hqs9V3Yn5L+7E1DoQY9pab1yiLp8xqlCiKYhQORzQOj1BzQ7y1nr6iotLzS6KSt+ofBwOwSvB82T6MvlQjptBZR/SjiABQs1neVDIGnejv7b8tbe4xURH8ygg==
ARC-Authentication-Results	i=1; mx.microsoft.com 1; spf=pass smtp.mailfrom=nbme.org; dmarc=pass action=none header.from=nbme.org; dkim=pass
DKIM-Signature	v=1; a=rsa-sha256; c=relaxed/relaxed; d=nbmeorg.onmicrosoft.com; s=selector1-nbmeorg-onmicrosoft-com; h=From:Date:Subject:Message-ID:Content-Type:LcjHUSk/EJEBMDEYL6ryca9xglRvCSIO4tJUXXK3zYlvHsU2Ek1hqs9V3Yn5L+7E1DoQY9pab1yiLp8xqlCiKYhQORzQOj1BzQ7y1nr6iotLzS6KSt+ofBwOwSvB82T6MvlQjptBZR/SjiABQs1neVDIGnejv7b8tbe4xURH8ygg==
From	Steven Maiorino <SMAiorino@nbme.org>
To	[REDACTED]
Subject	Test Email
Thread-Topic	Test Email
Thread-Index	AdYJDsEM27R+GqbqT+mHYGT92Dkjqq==
Date	Thu, 2 Apr 2020 16:50:08 +0000
Message-ID	<DM6PR15MB278094A7480775B6FA89E965C9C60@DM6PR15MB2780.namprd15.prod.outlook.com>
Accept-Language	en-US
Content-Language	en-US
X-MS-Has-Attach	yes

Figure 5: Headers from an Email sent from the actual NBME Domain

Figure 5 shows how different the header information looks when sending it through the NBME exchange server rather than passing it through a local mail server. We can clearly see the examinee could not have sent this email while logged in as the Webmail@nbme.org account since the headers (as seen in Figure 3) do not contain nearly as much information as Figure 5.

Additionally, here are the headers from the programmatically crafted email that I sent to myself using a local mail server (Figure 2). We can see they closely resemble the headers in Figure 3, enhancing the probability that this method, or something similar, was leveraged by the examinee to send the fraudulent email.

Headers Found

Header Name	Header Value
Content-Type	multipart/mixed; boundary="=====6297180200948102700=="
MIME-Version	1.0
From	Nbme <webmail@nbme.org>
To	smaiorino@nbme.org
Subject	Re. USMLE Step 3 Score Report

Figure 6: Headers of the Proof of Concept Programmatically Generated Email

3. Salesforce Emails

As a closing remark, all emails Webmail@nbme.org have been sent via NBME Salesforce instance since November 2017. NBME reached out to several of their Salesforce consultants (Matt Ankerbrandt and Arielle Boylan) for them to obtain the email sent to the examinee, Paul Bowary, but no history of this email exists in Salesforce. This email would have been in the NBME Salesforce instance if it was actually sent, which enhances the probability of the examinee forging this email themselves.

PROPRIETARY AND CONFIDENTIAL MATERIALS - NOT FOR DISTRIBUTION

This is the explanation from Dr. Bowary about the score recheck process he alleges was performed by NBME for his April 8, 2018 Step 3 administration. NBME staff confirmed there has never been a change to a USMLE score as a result of a score recheck.

Date: March 25, 2020

To: Paul Bowary

From: Office of the USMLE Secretariat Staff

Dear Dr. Bowary:

Thank you again for the information and the email that you provided. We are continuing to investigate this matter and have a few additional questions.

- When you requested the score recheck, what process did you follow? Specifically, who did you call and what information were you asked to provide or submit?

- Do you have any additional correspondence either sent to you or by you regarding the score recheck? For example, did you reply to the July 8, 2019 email you provided to us? Please provide us with any correspondence you have regarding this matter.

- Did you pay a fee for the score recheck? If so, can you please provide a cancelled check or a bank statement that reflects the payment.

Thank you again for your continued attention in this regard. We understand that this is a time sensitive matter and your continued responses are helping us get a response to you as soon as is possible.

Date: March 26, 2020

To: Office of the USMLE Secretariat Staff

From: Paul Bowary

Hi Nicole,

To answer your questions. When I called nbme I was not calling to request a score recheck. I called simply because the name of that department, "examinee support team", sounded like the right group to contact. I asked whether I can speak to someone regarding a difficulty I faced during my examination and get advice. I spoke to a very nice lady called Elizabeth or Liz or Liza (I'm not 100% sure about the name though). That was literally back in 2018 after I got my first attempt scores. She was very compassionate after I explained to her that I had [REDACTED]

[REDACTED] She never asked me to request a score recheck. She used terms like "re-analysis", asked me for an approximate % of the duration of the test that was jeopardized by that [REDACTED] (and I said ~ 20%), requested that I fax a letter that I had from an urgent care that mentioned the [REDACTED] If I find that letter or copy of it I can send it to you. We spoke via phone two times during that period. I can't remember if there were any other email from her. Things took so long that I did not imagine I was getting a score recheck. That day where I received the email and the new score report in July 2019, I was so

overwhelmed that I did not want to read the word step 3 ever again. The email said this is my official score if I don't respond so I didn't.

At this point, if this investigation is going to take longer, could you at least please contact RI department of health and confirm my score report so that they can move forward with my license? I am really worried that if I will have to wait until this is over, and then until FCVS collects my updated scores and send them to RI DOH, I will face major delays with my graduation, my next year visa and my job start date.

Thank you for your understanding and help!

The following are emails from FSMB staff confirming that the refunds issued to Dr. Bowary were requested by him for personal reasons and were not issued as a result of a change from a fail to a pass on a Step 3 administration, as he alleges.

Date: March 31, 2020
To: Office the USMLE Secretariat Staff
From: FSMB Staff

Hi Nicole:

I apologize for the delay in responding, it has been a very busy time here at the FSMB.

The August 2019 refund was due to a VISA issue, in which he provided copies of his VISAs and a statement that came from ECFMG.

The October 2018 refund was due to an illness that he claims prevented him from testing and he provided a note from a physician at the VA in Providence RI.

We don't use a form to make the request for refunds, we tell the examinee to send an email along with documentation from a fully licensed treating physician to support their request or any documentation that supports their request as in a VISA situation.

Other email communications were related to the two refunds, none of which was related to (or that I can tell) a refund after a score review/recheck. We did have an issue where the refund we provided in October 2018 went back to a credit card that was no longer valid and we ended up providing him with a check instead.

Date: April 2, 2020
To: FSMB Staff
From: Office of the USMLE Secretariat Staff

Hi Debbie,

No worries, I truly appreciate any information that you are able to provide.

The one thing we still need (if it's possible) is to get copies of the receipts or payment summaries Dr. Bowary would have received or had access to in connection with the refunds that he received. He supplied documents that correspond to the August 2019 refund as if he had received them in connection to a score recheck and we would like to be able to demonstrate that he received the same documents for a different purpose. I've attached them so that you can see what he sent. Is there any way that we could get those? If he would have never received or had access to the items attached for any purpose, that would be helpful to know as well.

Date: April 3, 2020
To: Office the USMLE Secretariat Staff
From: FSMB Staff

Hi Nicole:

There is no formal receipt for a refund. The receipts that he provided he obtained from his account with FSMB. This account tells him all of the transactions that he had with our office for any of our services over the last couple of years. The account shows payments and credits.

I have asked my other staff if they had any communication with him and they provided the attached emails. You will note in one of the emails we just provide a brief statement about the refund being processed.

Nothing else I have is related to a refund for a score recheck. Both of the refunds were related to personal issues he experienced. On what he has provided to you is there a staff person name from the FSMB that you would provide for me to look further?

Date: October 30, 2018
To: FSMB Staff
From: Paul Bowary

These emails show that Dr. Bowary requested the October 2018 refund he received from FSMB. FSMB staff confirmed the extenuating circumstance he cited during his phone call was illness.

Good afternoon,

My name is Paul Bowary. I have spoken with your office manager Debbie yesterday regarding my step 3 application. Unfortunately, I had to cancel my exam appointment on the 10/18/18. Prometric will reimburse my cancellation fee but could not accomodate me given that my eligibility (with extension) ends on 10/31/18.

I will be paying for a new step 3 application and I genuinely cannot afford all these expenses at this point. I did not plan or even expect things will get to this point. Deb promised that this email may help me in getting my application fee reimbursed which I would truly appreciate.

I am writing this email to **CANCEL** my current application and request **REIMBURSEMENT** for my application fee; given that I had no control over the last reason behind my appointment cancellation. Attached is a supporting documentation.

Thank you so much in advance for your understanding and for taking the above into consideration.

My USMLE ID is: 08992844

Date: October 30, 2018
To: FSMB Staff
From: Paul Bowary

To whom it may concern,

I just saw online that a refund in the amount of 750\$ was issued for me on 10/30/18.

I am not sure how you are planning to send the money back. Can you please send it by check?

The card I used in the past is for an account that is currently closed.

MY ADDRESS IS : 20 MISSION PLACE, PROVIDENCE, RI 02908

Thank you so much for your help!

Date: November 5, 2018
To: Paul Bowary
From: FSMB Staff

Dear Doctor,

Unfortunately, there is nothing we can do at this point because the refund was already processed, and the funds were taken from FSMB's bank account. Your bank should be able to locate the funds even if the card is closed. I am including some information below that may be helpful to the bank in locating the funds:

Order #:	PP00732468
Oracle Seq #:	212407712219997185345043934319411200

The refund was issued to a MC ending in REDACTED. The PayPal transaction ID is AQ1PFAD91F92.

Date: November 14, 2018
To: FSMB Staff
From: Paul Bowary

To whom it may concern,

Please refer to below email regarding a refund that I have not received yet. It has been 2 weeks since this was supposedly processed. I have spoken to my bank and to Debbie and confirmed this refund could not have been issued to the card as that card belongs to a closed account.

Please follow up with me regarding next steps.

Thanks

Paul B

Date: July 31, 2019
To: FSMB Staff
From: Paul Bowary

These emails show that Dr. Bowary requested the August 2019 refund he received from FSMB due to a VISA issue. He presented the refund summary to NBME on March 5, 2020 and claimed he was issued the refund due to his score changing for his April 8, 2018 Step 3 administration.

Good afternoon,

My application will expire today (including eligibility extension). I am writing to CANCEL my current application and kindly request REIMBURSEMENT. This is not the first time this happens as I have been struggling with personal issues that caused multiple delays.

I have other application and licensing costs coming ahead and I would truly appreciate reimbursement for all or part of the application fee, as I have not really used it.

If this is approved,
you can either issue me a check to:
20 Mission Place, Providence, RI 02908
or by direct deposit to the following account:
Routing: REDACTED
Account#: REDACTED

If you need a debit card instead, please connect to me by email or cell: 401-465-1179
Because I am not sure the card you have on file is a card I am still using.
My USMLE ID is: 08992844

Date: August 1, 2019
To: Paul Bowary
From: FSMB Staff

Dear Dr. Bowary,

I am sorry that you were not able to complete your Step 3 exam within your eligibility period. The USMLE Bulletin of Information states the following:
"If you do not take the test within your original or extended eligibility period and wish to take it in the future, you must reapply by submitting a new application and fee(s). The USMLE Step 3 fee is non-refundable and non-transferable from one eligibility period to another or from one application to another."

There are a few circumstances when a partial refund can be made, such as medical emergencies, death of an immediate family member (spouse, father, mother, child) and VISA issues. All of these circumstances require documentation to be provided. Requests in these types of circumstances should be emailed to usmle@fsmb.org

Please include your name, USMLE number and email address in the letter along with a confirmation of your cancelation with Prometric. Once the letter and documentation are received the committee will review your case. You will receive an email notification once a decision has been made. The refund process takes approximately 2 - 4 weeks.

If you do not meet one of the circumstances listed above you will be required to submit a new application and fees.

Date: August 9, 2019

To: FSMB Staff

From: Paul Bowary

To whom it may concern,

My name is Paul Bowary. USMLE ID: 08992844.

I was advised to reach out to you again with documentation regarding my request for refund of my last Step 3 application that I have not ended up using.

I had difficult personal circumstances that were behind my multiple usmle step 3 test date changes. However, the reason this was not done during the extended eligibility period is a visa related matter.

I am attaching copy of the letter received from ECFMG stating that my training would get interrupted if I do not submit a valid passport copy in a timely fashion. That was one of the multiple emails we received from ecfmg in June which urged me to drop any other responsibilities and work on my passport situation; otherwise ECFMG would not sponsor my J1 visa (now all resolved).

My passport had expired while I was here in the US as I found out I was supposedly unable to renew it without going back to my home country. I had to travel multiple times to the Lebanese consulate in NY in order to apply for an exceptional one year extension while I signed an affidavit that I will be getting a new passport within 2 months (traveling to Beirut tomorrow).

I am also attaching copy of my passport with the renewal page as well as the signed affidavit for you to get a sense of the timeline.

This past year has been very difficult for me [REDACTED] emotionally and financially. I would be very appreciative if you can help me protect my confidentiality around these problems as well as consider reimbursing me for my last application fee. I am thankful in advance for your understanding. Your office had been empathetic and helpful to me in the past; I hope that I can ask for this last bit of extra support.

If this is approved,

You can use the following information for direct deposit to the following account:

Routing: [REDACTED]

Account#: [REDACTED]

If a debit card information is needed please let me know and I can provide that (I am not sure which card I used back when I registered and I changed banks twice this past year)

Thank you so much for your understanding!

Date: August 14, 2019
To: Paul Bowary
From: FSMB Staff

Dear Dr. Bowary,

A partial refund of \$ 775.00 has been granted. Please provide a current mailing address for check to be issued and mailed to you.

Date: August 14, 2019
To: FSMB Staff
From: Paul Bowary

Thank you so much for reviewing my request and granting this refund.

I reviewed my bank statements and I realized that the card I used is my active Chime Banking Visa Card ending with REDACTED

You can process the refund to go back on that card. Please let me know if you have any questions or concerns about that.

Thank you so much again!

Date: August 15, 2019
To: Paul Bowary
From: FSMB Staff

Dear Dr. Bowary,

We have processed a partial refund in the amount of \$775 for your Step 3 application. You should see the credit to card within 7-10 business days.

EXHIBIT P-4

From: [USMLESec](#)
To: KWoodward@grieco-law.com
Subject: Dr. Bowary - Part 4 (08992844)
Attachments: [image001.png](#)
[Dr. Bowary - CIR Materials - Part 4.pdf](#)

Please reply to confirm receipt.

Thank you,

Amber
Program Manager
Office of the USMLE Secretariat

T +1 215-590-9873
E usmlesec@nbme.org
W usmle.org



3750 Market Street, Philadelphia PA 19104, USA

These are emails Dr. Bowary sent to the Rhode Island Department of Health (RIDOH), in which he alleges he passed Step 3.

Date: March 6, 2020
To: Rhode Island Department of Health
From: Paul Bowary

Hi Alexandra,

Please find attached copies of my step 3 score report, nbme's explanation, payment transaction report showing that fsmb refunded me for the second attempt after nbme updated the score of my first attempt.

Two last important points. Please make sure the nbme email copy is kept confidential as I was required to only share this with my program directors. Also, please let me know if I need to submit another check as my bank cancels checks that are not cashed within a certain period of time.

Date: March 6, 2020
To: Rhode Island Department of Health
From: Paul Bowary

Hi Alexandra,

Thank you for your update. This really all comes down to a delay from FCVS who messed up my score report thing.

FSMB submitted a request for USMLE to investigate what went wrong and why FCVS is still reporting failed attempts. FSMB stated this will take some time to clarify and update everything. I am hoping you won't make me wait for that until I get my license.

I am attaching my actual Step 3 score report (you had copies of it before) and also forwarding the FSMB email stating they are happy to communicate this with you. Her name is Debby Cusson and her contact information is below.

Please let me know if you have any questions.

Date: April 16, 2020
To: Rhode Island Department of Health
From: Paul Bowary

Dear Alexandra,
I hope you are doing well and staying safe and healthy.

I have not heard back from you re. a matter that should have been dealt with urgently especially with the growing need of physicians in this pandemic.

I have been overwhelmingly busy at work that I forgot about this. I am shocked to see that my license application is still pending. I gave you the consent to call anyone you want in case you guys "do not believe" what a physician, treating patients in your state, up until now, is telling you.

this being said, if this process cannot be finalized asap, I would like you and Dr McDonald to explain in writing that you are declining my application, knowing you have received all the documents required for me to get my full license. I said it before, I am saying this again, USMLE are taking super long time to process anything (in this case to contact you with my updated scores) because of Covid-19. You are welcome to contact them. I am also attaching the original emails from USMLE with my passing scores. This email is an untouched unforwarded original version of what USMLE sent me. You can review it with your IT department; this is a way to share unmodified original emails. I am not sure what else I can provide.

Please let me know in writing that despite

1. knowing the urgent need for any qualified physician to have a full license to potentially help with this pandemic whenever the decision comes to pull us all out from our residencies to help in the ICU/ED

2. knowing the urgent need to be ready now more than ever to practice my upcoming job asap if needed even before my planned start date

3. and knowing that you have all the documents you need including what fcvs gathered and my "original version" of my passing step 3 scores that again you are welcome to verify with any party you want..

you continue to decline to move forward with my application. I need our CNE lawyer to review this response from you asap.

Date: April 16, 2020

To: Rhode Island Department of Health

From: Paul Bowary

Dear Alexandra,

Thank you for emailing FSMB and cc-ing me. I think by now you realize that it has not been a matter of me reaching out to USMLE/FSMB and asking them to contact you. I have done that multiple times. As you notice, you did not get a response. Their delays are unacceptable yet lately blamed on covid 19 - sadly.

Per My program directors recommendation, I am using a lawyer's expertise in this matter. He has access to the same documents you have access to and believes this is an unreasonable situation too. He will be reaching out to Dr McDonald shortly. The last email I have sent you - although it is from me - is sent to you in a format that would legally be equivalent to receiving it from the sender himself.

Below is more information I just received from CNE's lawyer indicating the seriousness of the constraints that a non-processed license application can cause to my visa paperwork.

I have no power over expediting USMLE's procedures. They have to take their time to investigate with their own employees before they release the updated score to FCVS. I believe I have legal rights to use my official scores, hence the lawyer's intervention.

I would like to re-iterate that I have not been asking you to "take my word for it". I have shared with you original documentation from nbme. This is what the lawyer who is helping in this will be referring to.

Please confirm that you received this email and whether there are any updates.

Thank you!

Paul Bowary

----- Forwarded message -----

From: **Tom Brown** <tbrown@rodiobrown.com>

Date: Thu, Apr 16, 2020 at 11:16 AM

Subject: Care New England Medical Group

To: Paul Bowary <paul_bowary@brown.edu>

Hello Paul.

I hope you and your family are staying safe during this crisis.

I have sent forms and instructions to Care New England Medical Group ("CNEMG") regarding your sponsorship for a change of visa classification from J-1 to H-1B temporary worker, commencing July 1, 2020. Copies of the draft petition form and CNEMG petition support letter are attached to this email. Please review the drafts and advise me of any changes or corrections.

the USCIS has issued a new version of the I-129 H-1B petition form, which includes several pages of questions regarding receipt of "public benefits." Federal immigration law provides that a foreign national who is likely at any time to become a "public charge" is inadmissible to the U.S. For purposes of this law, a foreign national can be deemed inadmissible to the U.S. if that individual is receiving, or is likely to receive, one or more of the following "public benefits" for more than 12 months in the aggregate during any 36 month period: (1) any federal, state, local or tribal cash assistance for income maintenance, including Supplemental Security Income (SSI), (2) Temporary Assistance for Needy Families (TANF), (3) federal, state or local cash benefit programs for income maintenance, (4) Supplemental Nutrition Assistance Program (SNAP), (5) Section 8 Housing Assistance, (6) Section 8 Project-Based Rental Assistance, (7) Medicaid (with certain exceptions), and (8) Public housing under section 9 of the federal Housing Act. For this purpose, Public Benefits do NOT include emergency Medicaid, school-based services, benefits received by individuals under the age of 21, benefits received by pregnant women, and benefits

received by military families. **Please review pages 5 through 7 of the attached I-129 form and email those completed pages to me.**

You must hold a full RI medical license for the petition to be approved. Please confirm the status of your license application.

As a reminder, you must be in the U.S. when the H-1B petition is filed, and you are not permitted to depart the U.S. while the petition is pending. If you do depart before the petition is approved, the request for a change of status in the U.S. will be denied, meaning that you will need to depart the U.S., apply for and be issued an H-1B visa by an American Consulate after CNEMG's H-1B petition is approved, and then be readmitted to the U.S. pursuant to the H-1B visa.

Of note, you cannot commence employment with CNEMG until the USCIS approves your H-1B visa petition. Effective March 20, 2020 the USCIS suspended the premium processing option for all petitions, including H-1B petitions, due to COVID-19. Efforts are underway to secure an exemption from the suspension for physicians/health care providers. In the absence of such a suspension, there is an existing mechanism to request "expedited processing" of the petition because of "humanitarian" reasons and/or "national emergency". Obviously, the critical need for Psychiatrists because of COVID-19 should meet that requirement. I have included an expedite request with the petition. Once the petition receipt is issued, I will also request that Senator Reed's office assist with the expedited processing request, as has worked in years past.

Thank you for your continuing assistance with this matter.

PROPRIETARY AND CONFIDENTIAL MATERIALS - NOT FOR DISTRIBUTION

FRIEDMAN ■ FRAMME**■ THRUSH ■**

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COPY

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 EDWARD J. FRIEDMAN (1951-2008)

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May 26, 2020

USMLE

Secretariat

Amy Buono

3750 Market Street

Philadelphia, PA 19104

**Re: Paul Bowary
 Score**

Our File: RI-S75-Z72

Dear Ms. Buono:

Please accept this letter on behalf of Paul Bowary in response to your letter of April 27, 2020. In that letter, it has been alleged that Mr. Bowary has engaged in illegal behavior and that his USMLE step 3 score is fraudulent. That determination is counter to the information that has already been provided by Mr. Bowary.

In support of his objection to this finding, I have enclosed the USMLE report for the exam of April 8, 2018 indicating a passing score of 199. As you are aware this was the subsequent score issued by USMLE after the original failing score. This score was issued after Mr. Bowary had contacted NBME regarding his April 2018 score. Mr. Bowary has already provided to you the email from NBME pertaining to his revised score. I have also attached an email from Examinee Support Services at NBME explaining the revised score.

It is clear from the documents, paper trail and email strings that Mr. Bowary had initiated an inquiry with NBME after receiving his initial score for the April 2018 step 3 test. That inquiry resulted in responses from them and eventually a revised score (enclosed). The allegation that somehow Mr. Bowary fraudulently created an email in support of his revised score is insulting to Mr. Bowary and false. In addition to the alleged "email", there are other reports and correspondence that support the revised score. To conclude that his score was the result of illegal behavior would require multiple fraudulent documents that fly in the face of the facts.

On Tuesday, March 17, 2020, Nicole Miller explained in detail how she would like that Dr Bowary download the "original format of the email" he received from NBME in July 2019 and email it to her as an attachment. Dr Bowary ended up sending the original email with passing score report as attachment exactly as Ms Miller had requested. On March 25, 2020, Ms Miller acknowledged the receipt of this email from Dr Bowary. After reviewing Dr Bowary's email conversations with Ms Miller, it appears that Ms Miller had been diligently looking for this specific email format. On

every occasion where Dr Bowary had sent the email in a different format (forwarded or screenshotted versions), Ms Miller had made it a point to redirect Dr Bowary towards attaching the email in its original format. Thus, her acknowledgment of the receipt of this original email from Dr Bowary on March 25, 2020, makes your following quoted statement inaccurate, dismissive of the evidence and subsequently engaged in building a false conspiracy theory against Dr Bowary: *"The NBME has no record of sending an email from "webmail@nbme.org" on July 8, 2019 to paul.bowary@brown.edu."* Again, as of March 25th, 2020, Ms Miller has been in possession of the clear-cut evidence that Dr Bowary did in fact receive the revised score and explanation from NBME. Any delays in closing that investigation as well as any false accusations addressed after March 25th, 2020, must be expected to have serious legal consequences.

On behalf of Mr. Bowary, he is requesting that he be allowed to appear before the committee with counsel. Please indicate that date for his appearance. Furthermore, if there is any other information or clarification required please advise.

Please respond in writing within 10 days and direct your response to the physical address, email address or facsimile number provided.

Thank you for your prompt attention to this matter.

Very Truly Yours



Edward R. McCormick, III
Friedman, Framme & Thrush, P.A.

Enclosure

cc: Paul Bowary

PROPRIETARY AND CONFIDENTIAL MATERIALS - NOT FOR DISTRIBUTION

From: Bowary, Paul
To: [USMLESec](#)
Subject: Please bring to the attention of Amy Buono - Re: Referral to USMLE Committee for Individualized Review –
Date: Monday, June 01, 2020 9:53:36 PM
Attachments: [image001.png](#)
[image002.png](#)
[Friedman, Framme & Thrush - Lawyer Letter.pdf](#)

Dear Amy,

After reading this email today, I suspected you have not yet received my lawyer's letter. Please see attached a copy of that letter and be on the lookout for it.

Your email back in April was probably the most insulting thing I have ever read. It quickly became clearer to me that it is not safe for me anymore to handle this alone.

The delays of your investigation ignored all my professional deadlines and the unreasonable conclusions in your letter dismissed the fact-checking done by Nicole Miller.

For the record, I "never" provided any party with any information that I even suspected was false. When FCVS reported failed scores; I was surprised and I immediately reached out to

- 1) UA department
- 2) then FSMB
- 3) then NBME
- 4) then FSMB again
- 5) and finally DOH to let them know what is going (while under the impression you guys are investigating the reason why one of your employees did not close the loop with FSMB; I had no idea you are investigating my own genuinity).

Your formulation stating that I have shared incorrect information with anyone is deceiving especially that it does not just question my morals.. but also my judgement clarity. Why would I wait until FCVS collects my scores for me to create this issue?

Finally, the fact that you questioned the nature of my refund request sounds like a witch hunt. It is true that I shared some personal and financial constraints when I requested my refund.. which is simply because I had internalized so much shame around my test score issue that I did not feel like bringing it up again. The issues I shared and the re-scoring reality are not mutually exclusive. I just thought: once FSMB will get my refund request, they will access my file and be reminded that I am eligible for a refund anyway.

Please go ahead and schedule that virtual CIR meeting and please account for the virtual presence of a lawyer - as my understanding is that this meeting occurrence will mark the start of official legal proceedings. I am happy to go through my email inbox on camera in presence of a lawyer.

Amy, please acknowledge the receipt of this email in person. Please respond to my lawyer and myself with dates.

Thank you.

Best,

Paul Bowary

On Mon, Jun 1, 2020 at 8:07 AM USMLESec <USMLESec@nbme.org> wrote:

Dear Dr. Bowary:

I have an important update to share with you regarding your referral to the August 18-19, 2020 USMLE Committee for Individualized Review (CIR) meeting.

Due to health and travel restrictions related to the COVID-19 pandemic, the August meeting of CIR will be conducted remotely. To make a personal appearance before the Committee under these circumstances, you may submit a 15-minute long pre-recorded video in mp4 format, or you can appear before the Committee during the meeting via video or teleconference.

If you elect to appear virtually, you will receive an email advising you to appear on either August 18 or 19. Prior to the meeting, we will schedule time with you to ensure that you are familiar with the technology being utilized at the meeting.

Please note that your deadline to submit written materials is today, June 1, 2020. Should you choose to submit a pre-recorded video in mp4 format, please inform me in writing of this decision and I will contact you with a deadline for your video submission.

Kindly acknowledge receipt of this email as soon as possible.

Stay well,

Amber Montañano

AMBER MONTAÑANO

Program Manager

Office of the USMLE Secretariat

T +1 215-590-9873

E usmlesec@nbme.org

W usmle.org



3750 Market Street, Philadelphia PA 19104, USA

From: USMLESec <USMLESec@nbme.org>

Sent: Monday, April 27, 2020 11:50 AM

To: Bowary, Paul <paul_bowary@brown.edu>

Subject: Referral to USMLE Committee for Individualized Review – August 18-19, 2020:
Paul Bowary, USMLE ID 08992844

Dear Dr. Bowary:

Please review the attached documents and respond by the requested deadlines. If you would like to receive a hard copy of this correspondence, please confirm your address.

If you have any questions or concerns, please feel free to contact my office at

USMLESec@nbme.org.

Sincerely,

Nicole Miller
Program Manager

Office of the USMLE Secretariat

T +1 215-495-6136

E USMLESec@nbme.org

W nbme.org



3750 Market Street, Philadelphia PA 19104, USA

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--

Paul Bowary, M.D.
PGY-IV Psychiatry Resident
APA New England/Eastern Canada RFM Rep
Butler Hospital/ Brown University, DPHB
(VM) 401-455-6200 x26133



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TINA KINGWOOD (VA)
STEPHANIE EVANS (VA, CT)

June 26, 2020

US MLE
Program Manager
Office of the USMLE Secretariat
Nicole Miller
3750 Market Street
Philadelphia, PA 19104

**Re: Paul Bowary
Score**

Our File: RI-S75-Z72

Dear Ms. Miller:

Please accept this letter on behalf of Paul Bowary as a follow up and further submission to the CIR. Mr. Bowary would like to express that at no time did he provide provided any party with any information that he even suspected to be false. When FCVS reported failed scores, he was surprised and he immediately reached out to:

- 1) UA department
- 2) then FSMB
- 3) then NBME
- 4) then FSMB again
- 5) and finally DOH to let them know what his status was.

He further adds that your formulation stating that he has shared incorrect information with anyone is deceiving especially that it does not just question his morals, but also his judgement clarity.

I trust that all of the prior emails and documents he has provided have been made a part of his submission.

Thank you for your prompt attention to this matter.

Very Truly Yours

Edward R. McCormick, III
Friedman, Framme & Thrush, P.A.

cc: Paul Bowary,

EXHIBIT Q

From: [Kimberley Woodward](#)
To: [USMLESec](#)
Subject: Dr. Paul Bowary (08992844)
Date: Tuesday, February 9, 2021 2:35:48 PM
Attachments: [Bowary re USMLE - USMLE 2021.2.9.pdf](#)
[ExA 10-22-20 Letter D. Grieco to USMLE with enclosures.pdf](#)
[ExB 11-5-20 and 11-10-20 Emails from Amber to K. Woodward.pdf](#)
[ExC Dr. Hayes" 2-9-21 Report.pdf](#)
[ExD Dr. Hayes" Curriculum Vitae.pdf](#)
[ExE Dr. Hayes" Biographical Statement.pdf](#)

Greetings:

Please see the attached correspondence and related exhibits from Atty Dennis Grieco, dated 2/9/21 regarding the above. Original correspondence will be forwarded via U.S. Priority Mail for overnight delivery.

Thank you,

Kim

Kimberley M. Woodward

Legal Asst. for Dennis T. Grieco II, Esq.

GRIECO LAW | 70 Jefferson Boulevard, Suite 301 | Warwick, RI 02888

Tel: 401-432-7400 | Fax: 401-461-4107 | E-Mail: KWoodward@grieco-law.com

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EXHIBIT R

From: [Dennis Grieco II](#)
To: [USMLESec](#)
Subject: FW: Dr. Paul Bowary (08992844)
Date: Wednesday, February 10, 2021 9:50:50 AM
Attachments: [Bowary re USMLE - USMLE 2021.2.9.pdf](#)
[ExA 10-22-20 Letter D. Grieco to USMLE with enclosures.pdf](#)
[ExB 11-5-20 and 11-10-20 Emails from Amber to K. Woodward.pdf](#)
[ExC Dr. Hayes" 2-9-21 Report.pdf](#)
[ExD Dr. Hayes" Curriculum Vitae.pdf](#)
[ExE Dr. Hayes" Biographical Statement.pdf](#)
Importance: High

Dear Ms. Buono and Montanano,
I spoke with Nicole Miller of your office yesterday about this submission, apologizing for its timing and inquiring how it would be addressed. I also explained that the significance and import of it is such that if the committee wants more time to review it, we would have no objection. I asked how this would be handled and Ms. Miller said one of you would get back to me. Please let me know how this will be addressed.

Thank you kindly.

Sincerely

Dennis T. Grieco II, Esq.

GRIECO LAW

70 Jefferson Boulevard

Suite 301

Warwick, RI 02888

(401) 432-7400 Phone

(401) 461-4107 Fax

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From: Kimberley Woodward <KWoodward@grieco-law.com>

Sent: Tuesday, February 9, 2021 2:33 PM

To: USMLESec <USMLESec@nbme.org>

Subject: Dr. Paul Bowary (08992844)

Greetings:

Please see the attached correspondence and related exhibits from Atty Dennis Grieco, dated 2/9/21 regarding the above. Original correspondence will be forwarded via U.S. Priority Mail for overnight delivery.

Thank you,

Kim

Kimberley M. Woodward

Legal Asst. for Dennis T. Grieco II, Esq.

GRIECO LAW | 70 Jefferson Boulevard, Suite 301 | Warwick, RI 02888

Tel: 401-432-7400 | Fax: 401-461-4107 | E-Mail: KWoodward@grieco-law.com

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copies of the original message.

EXHIBIT S

From: USMLESec
Sent: Friday, February 12, 2021 6:38 PM
To: Bowary, Paul; Dennis Grieco II
Subject: USMLE Committee for Individualized Review (CIR) Appeal Decision Letter - Paul Bowary, USMLE ID: 08992844
Attachments: Bowary - Appeal Decision Letter.pdf; USMLE Policies and Procedures re Irregular Behavior.pdf

Dear Mr. Greico:

In an email dated October 21, 2020, we advised you that Dr. Bowary's appeal to the Composite Committee was due to this office no later than January 1, 2021. We received your appeal documents on February 9 at 2:30 pm, the eve of the Committee's meeting. Given that your submission was received more than 5 weeks after the scheduled deadline, the Committee declined to review the contents. The Composite Committee rendered its decision based on the contents of Dr. Bowary's file on January 1, 2021 and the decision is attached hereto.

If you or Dr. Bowary would like to receive a hard copy of this letter, please confirm the address for receipt. If you have any questions or concerns, please feel free to contact my office at USMLESec@nbme.org.

Sincerely,

Nicole Miller
Program Manager
Office of the USMLE Secretariat

She/Her/Hers

T +1 215-495-6136
E USMLESec@nbme.org
W nbme.org



3750 Market Street, Philadelphia PA 19104, USA



Secretariat:
3750 Market Street
Philadelphia, PA 19104
(215) 590-9500
USMLESec@nbme.org
www.usmle.org

Via Email
Personal and Confidential

February 12, 2021

Paul Bowary
20 Mission Place
Providence, RI 02908

USMLE ID#: 0-899-284-4

Email: paul_bowary@brown.edu

Dear Dr. Bowary:

I am writing to inform you that the USMLE Composite Committee met and considered your appeal of the decision of the Committee for Individualized Review (CIR) to annotate your USMLE record for irregular behavior, with reporting to the Physician Data Center of the Federation of State Medical Boards, and to bar you for a minimum of three years from registering for or taking USMLE. The CIR decision also states that the bar may only be lifted if the USMLE program receives a request to allow you to sit for USMLE examinations from a U.S. medical licensing authority, after full disclosure to it of the events that led to the imposition of the bar.

The information provided to the members of the Composite Committee in advance of its consideration of this matter consisted of the following: (a) my letter to you dated September 23, 2020, reporting the CIR's determination that you engaged in irregular behavior, along with copies of all documents referenced in the second paragraph of that letter; (b) a transcript of your personal appearance before the CIR; and (c) your appeal letter and supporting documents to the Composite Committee, submitted on October 22, 2020.

The Composite Committee carefully considered all of those materials and the information contained therein. Upon such consideration, the Composite Committee found that the CIR acted in compliance with applicable USMLE policies and procedures and did not make a decision that was clearly contrary to the weight of the evidence before it. Therefore, the Composite Committee concluded that the determination of the CIR will stand; your USMLE record remains permanently annotated for irregular behavior, with reporting to the Physician Data Center of the Federation of State Medical Boards, and you will be barred for a minimum of three years from registering for or taking USMLE (i.e., until August 20, 2023, if you have maintained your eligibility continuously up until that date). Periods of ineligibility will not count toward this three-year bar. After August 20, 2023, the bar may be lifted if the USMLE program receives from a U.S. medical licensing authority, after full disclosure to it of the events that led

A Joint Program of the Federation of State Medical Boards of the U.S., Inc. and NBME



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www.nbme.org

to the imposition of the bar, a request to allow you to sit for USMLE examinations.

If you have any questions regarding the foregoing information, please do not hesitate to contact me at USMLESec@nbme.org.

Sincerely,

A handwritten signature in black ink, appearing to read "Amy Buono". The signature is fluid and cursive, with the first name "Amy" and last name "Buono" clearly distinguishable.

Amy Buono
Office of the USMLE Secretariat

c: ECFMG

FSMB

NBME

Mr. Dennis T. Grieco II, Esq.

The Rhode Island Department of Health

Tracey Guthrie, M.D.

***United States Medical Licensing Examination (USMLE)
Policies and Procedures Regarding Irregular Behavior***

Introduction

The following policies and procedures regarding irregular behavior are intended to protect the integrity of the USMLE examination program. If the irregular behavior creates a good faith basis for questioning the validity of an examinee's scores, the policies and procedures described in another document, entitled *USMLE Policies and Procedures Regarding the Validity of Passing Level Scores*, may also be applicable.

A. Policies

1. *Irregular behavior* includes all actions or attempted actions on the part of applicants, examinees, potential applicants, or others that could subvert the examination process. Examples of irregular behavior include, but are not limited to: failing to comply with any USMLE policy, procedure, and/or rule; seeking and/or obtaining unauthorized access to examination materials; providing false information; impersonating an examinee or having someone else test in one's place; giving assistance to or receiving assistance from another individual in answering test items; possessing unauthorized items, equipment or materials during an examination; altering or misrepresenting examination scores; engaging in disruptive or unprofessional behavior at a test center; theft of examination materials; unauthorized reproduction by any means and/or dissemination of examination content or other copyrighted materials; posting or discussing examination content on any website, or asking others to do so; and taking any other action that could give an inappropriate advantage to individuals who might be taking the examination.
2. If the USMLE Committee for Individualized Review ("CIR") determines that irregular behavior has occurred, an annotation to that effect will be entered in the USMLE record of the examinee, and this annotation will appear on applicable score reports (if scores are reported) and on transcripts for that examinee. Information regarding the decision of the CIR and the basis for such decision may also be provided to legitimately interested entities, including the Federation of State Medical Boards' Physician Data Center.
3. If the CIR determines, in its discretion, that an individual engaged in irregular behavior that is sufficiently serious to warrant such action, the individual may be barred from future administrations of USMLE or subjected to special procedures for taking future USMLE examinations, in addition to being subject to the actions described in Paragraph A.2, above.

4. A CIR finding of irregular behavior may be appealed by the affected individual to the USMLE Composite Committee in accordance with Paragraph B.8, below. The pendency of an appeal, however, will not stay or delay implementation of the CIR's decision.

B. Procedures

1. After acquiring information suggesting irregular behavior on the part of an individual from third-party reports, statistical analysis, fact investigation, or otherwise, staff will assess whether there is sufficient evidence to conclude that irregular behavior may have occurred. Staff will conduct a follow-up investigation to gather additional information when necessary.
2. If the staff analysis and/or follow-up investigation will not be concluded until after the typical period for the reporting of scores, the examinee and the entity to which scores would normally be reported will be notified that the reporting of the scores in question is being delayed pending further review.
3. If, at the conclusion of its investigation and analysis, staff finds that there is a reasonable basis to conclude that an individual has engaged in irregular behavior, the matter will be referred to the CIR. If the individual is an examinee, his/her scores will be withheld if not already released, and the individual might not be permitted to sit for subsequent examinations, nor will Step applications be processed, pending a decision by the CIR.
4. If a potential irregular behavior incident is referred to the CIR, the individual involved will be notified using the individual's last known email and postal address and provided with a copy of the applicable USMLE policies and procedures. The individual will be advised of the information which initiated the investigation and relevant findings of the investigation. The individual will be given an opportunity to provide an explanation for the facts described in the findings and to present other relevant information. The individual may request the opportunity to appear personally before the CIR. If the individual involved appears personally before the CIR, the oral presentation will be made under oath and a stenographic or audio recording may be made at the election of the CIR.
5. The CIR will consider all available pertinent information in deciding whether an individual engaged in irregular behavior, including the record assembled by staff, statistical analyses employed by staff (if any), and any explanation or other information that the individual may provide. If the CIR determines that there is a good faith basis for concluding that irregular behavior has occurred, the affected individual will be notified and informed of the right to appeal the CIR decision in accordance with Paragraph B.8, below. Regardless of whether an appeal is taken, an annotation indicating the nature of the irregular behavior will be entered immediately in the individual's USMLE record. This annotation will appear on the applicable score report (if scores are released) and on transcripts for the

individual. At the discretion of the CIR, information regarding a CIR finding of irregular behavior may also be provided to legitimately interested entities, including but not limited to the entity that certified the individual's eligibility for the examination in question, a medical education or training program in which the individual has participated or is participating at the time of the CIR's decision, and/or the FSMB's Physician Data Center. All medical licensing authorities that have received a score report or transcript for this individual in the past will receive an updated transcript and/or score report which reflects the CIR's decision.

6. If suspected irregular behavior raises concerns about the validity of a USMLE score, staff and/or the CIR may elect to review the matter and to proceed under these policies and procedures and/or under the *USMLE Policies and Procedures Regarding the Validity of Passing Level Scores*, as staff and/or the CIR deem appropriate and without requiring staff and/or the CIR to conduct separate proceedings.
7. In the event of irregular behavior that the CIR deems, in its discretion, to be sufficiently serious to warrant such action, the CIR may bar the individual from future examinations and/or implement special procedures for administering future examinations to the affected individual. If an individual is barred from future examinations, the CIR may allow for testing after a specified minimum time, upon petition of a medical licensing authority.
8. A decision of the CIR may be appealed to the USMLE Composite Committee if the individual involved has a reasonable basis to believe the CIR did not act in compliance with applicable USMLE policies and/or procedures or that the CIR's decision was clearly contrary to the weight of the evidence before it. The appeal must be received within 30 days of the date on which the notice of the CIR's decision was mailed to the individual. If the score for the examinee and CIR findings are reported during the pendency of the appeal, the recipient of the report will be informed that the individual is appealing the decision. The Composite Committee will decide appeals based upon a written record, including all information available to the CIR, a transcript of the recording made during the individual's appearance before the CIR (if there was such an appearance and it was transcribed), and the basis for appeal set forth by the individual. Neither the individual who is the subject of a CIR decision nor anyone representing that individual shall be entitled to appear in person before the Composite Committee. If the Composite Committee determines that the CIR did not act in compliance with applicable USMLE policies and procedures and/or that the decision of the CIR was clearly contrary to the weight of the evidence, the Composite Committee may reverse the decision of the CIR or remand the matter to the CIR or staff for further consideration. If the Composite Committee reverses the decision of the CIR to annotate the individual's USMLE record, all entities that received USMLE transcripts or score reports showing irregular behavior will be notified of the decision of the Composite Committee and provided with an updated transcript and/or score report. Otherwise, the determination of the CIR will stand.